

DISTRICT 19 COMMUNITY SERVICES BOARD

MENTAL HEALTH, INTELLECTUAL DISABILITY and SUBSTANCE ABUSE SERVICES

20 W. Bank Street - Suite 7 • Petersburg, Virginia 23803

(804) 862-8054 - Fax: (804) 863-1665

jhubbard@d19csb.com

jkirkland@d19csb.com

Joseph E. Hubbard, C.P.A.

Executive Director

ADDENDUM NO. 2 - March 04, 2015

Jennifer Kirkland

Director of Operations

Reference – Request for Proposal: RFP # PHARMSVCS030120

Commodity: Pharmaceutical Services

Dated: January 21, 2015

A. See Attachment 1: Questions for District 19 Community Services Board/ Past Invoices/Drug Utilization Fill Date(s) 11/1/2014 – 1/31/2015

Signature of Person Authorized to Sign this bid: _____

Print Name of Person Authorized to Sign this bid: _____

Company Name: _____

Address: _____

Phone: _____

Fax: _____

Email: _____

- PARTICIPATING MEMBERS -

Colonial Heights
(804) 520-7210

Dinwiddie
(804) 469-3746

Emporia/Greenville
(434) 348-8900

Hopewell/Prince George
(804) 541-8660

Petersburg
(804) 862-8002

Surry
(757) 294-0037

Sussex
(804) 834-2205

ATTACHMENT: 1

Questions for District 19 Community Services Board
RFP# PHARMSVCS030120: Pharmaceutical Services

All Inquiries for information should be directed to:

Theoria M. Nixon

Phone: (804) 862-8054 x3102

tnixon@d19csb.com

1. What is the average number of prescriptions filled per month per CSB location for the past 12 months?
 - A. The average is 350 to 425 prescriptions.

2. What type of medication packaging (blister cards, vials, strips, other) do you currently use? Do you intend to keep the same packaging?
 - A. Bottles

3. How many days' worth of medication is (7, 14, 30 days) typically is dispensed for routine medication orders? Do you intend to keep this the same?
 - A. 30 days- which we intend to keep the same routine.

4. What is your current cutoff time by which you must submit orders to the pharmacy to receive next-day delivery? Do you intend to keep this the same?
 - A. Cut off time is 4pm. Yes, we intend to keep this the same.

5. What is the average dollar amount spent on pharmacy per month per CSB location for the past 12 months?
 - A. The average amount is \$32,000-42,000 per month for all of D19CSB consumers.

6. Regarding the current contract rate for pharmacy services:
 - Is it a discount to average wholesale price (AWP)? If so, what is the current discount to AWP?
 - Is it acquisition cost plus a dispensing fee? If so, what is the current dispensing fee?
 - If other, please provide.
 - A. Yes, the current model is cost plus % on a sliding scale.

7. Regarding items eligible for credit:
 - Does the CSB receive credit only on items originally provided in blister cards packaging?
 - A. N/A
 - Do you also receive credit on medications dispensed in vials?
 - A. We do receive credit for some returned items in bottles.

8. Actual utilization data would be very helpful for prospective offerors to study product mix and prescriber ordering trends so they can prepare a responsible and competitive bid rate. Would you consider providing an addendum to the solicitation that contains a copy of your three most recent pharmacy invoices with this utilization information?
 - A. See Attached (Past invoices and Drug Utilization Fill Date(s) 11/1/2014 – 1/31/15

9. Who is your current pharmacy services provider?
- A. **Westwood Pharmacy.**
10. How long has your current pharmacy provider been servicing the CSB?
- A. **Our current pharmacy provider has serviced us for the past 5 years.**
11. Do you intend for medications to be delivered to the CSB locations, and then the CSB will provide the medications to patients?
- A. **YES**
12. Regarding item 3.1.7 on page 5 of the RFP—On average, how many prescriptions per month are billed to Medicaid or other third party insurance? Does the CSB provide insurance information to the pharmacy at the time of order submittal?
- A. **None of these consumers have insurance. Medications are paid for by the CSB state allocation funding.**
13. Regarding item 3.1.15 on page 5 of the RFP—On average, how many non-CSB medications orders are dispensed per month? Does the pharmacy deliver these medications to the CSB location and then the patients pick up the medications?
- A. **We only provide psychotropic medications for D19 CSB consumers. All medications are delivered to the CSB locations. We also have medications delivered on occasions to Richmond Behavior Health Authority crisis stabilization program and Rubicon program.**
14. Regarding item 4.4.4, number 2 on page 9 of the RFP—Please clarify this requirement. What is meant by the provision of “personnel resources and present commitments”?
- A. **The vendor’s flexibility to District 19’s scheduling in cases of Holidays, Unexpected closings due to Inclement Weather, any type of emergencies. Clients are not always D19 clients and may need meds to be delivered to Rubicon or RBHA.(See#13) Meds that cannot be delivered on scheduled day for any of these reasons or others are to be delivered the next day if the emergency has been resolved.**
15. Regarding section 8.0 Special Terms and Conditions, item Q. Price Escalation/De-escalation on page 19 of the RFP— Medication costs are dictated by the manufacturer and change daily. Published prices such as average wholesale price (AWP) and wholesale acquisition cost (WAC) also are provided by drug manufacturers. Does section Q permit daily price changes on medication costs, but require a bidder to provide a firm and fixed dispensing fee or discount to AWP for the duration of the contract term?
- A. **No, only yearly based on section 8.**
16. The RFP does not specify a preferred pricing format. Should various bidders submit different pricing formats, establishing price differentials among bidders would be quite difficult. Would the CSB consider establishing a preferred pricing format (for example, AWP minus a discount, acquisition cost plus a dispensing fee)?
- A. **Pricing is discussed during the evaluation period of selected vendors and will not be submitted in your proposal.**
17. What current committees (that are in place) require a pharmacist to attend?
- What is the frequency of these meetings?

A. **None at this time but may be required in the future on a limited basis.**
 - Must they be attended in person?

A. **On a rare occasion.**

- Or, is video/teleconference permitted?

A. This is a possibility.

18. Does the CSB currently use an electronic barcode system to check in your daily medication order and to electronically process returns and credits? If not, would you be interested should a bidder be able to offer you a solution?

A. Yes, electronic barcode software is currently being utilized and is owned by the current provider.

19. Does your facility currently use an electronic order entry and eMAR system?

A. We currently use an electronic ordering entry.

- If so, can you provide the name of the system? N/A
- If not, would you be interested should a bidder be able to offer you a solution?

A. Yes

20. If bidders offer value-added services beyond your proposal specifications, can they submit that information in their proposals and would those services be considered during the evaluation process?

A. Yes

21. Will there be an opportunity to ask more questions in the event responses are unclear?

A. Yes, but bids are due on March 11, 2015 at 3pm. All questions should be sent by Friday, March 6, 2015 at 12pm. No other questions will be answered after this date and time.

22. When medications are ordered how long do you expect the delivery of the meds?

A. The next day or no later than day 2.

23. Are there a lot of injectable at Bank Street?

A. Yes

24. Is D19 able to enter into the pharmacist system?

A. Yes

25. Does D19 have funding for people who do not have insurance?

A. Yes

26. Does D19 provide control meds?

A. No.

27. Who receives the bill for the medications?

A. Bill will be sent to Karen Louis attention and will be reviewed and sent to the Finance Department.



Westwood Pharmacy Clinical Services
 5823 Patterson Avenue, Suite A
 Richmond, VA 23226

Invoice

Date	Invoice #
1/9/2015	13652

Bill To
Petersburg Counseling Services Attn: Karen Louis 20 West Bank Street, Suite 6 Petersburg, VA 23803

P.O. No.	Terms	Due Date	Account #
	Net 30	2/8/2015	

Description	Amount
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19CH - Colonial Heights	2,547.02
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19DW - Dinwiddie	5,326.97
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19GE - Greensville/Emporia	5,096.64
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19HP - Hopewell/Prince George	13,026.28
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19PT - Petersburg Counseling	12,026.61
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19SC - Surry	1,941.25
Pharmaceuticals and Supplies for 12/1/14 to 12/31/14 - 19SW - Sussex/Waverly	4,065.87
Medical Supplies - 19PT	232.41
Sales Tax	0.00
Total	\$44,263.05

Phone #	Fax #
(804) 288-1933	(804) 288-1508



Westwood Pharmacy Clinical Services
 5823 Patterson Avenue, Suite A
 Richmond, VA 23226

Invoice

Date	Invoice #
12/10/2014	13520

Bill To
Petersburg Counseling Services Attn: Karen Louis 20 West Bank Street, Suite 6 Petersburg, VA 23803

P.O. No.	Terms	Due Date	Account #
	Net 30	1/9/2015	

Description	Amount
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19CH - Colonial Heights	2,843.02
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19DW - Dinwiddie	5,186.27
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19GE - Greenville/Emporia	1,175.52
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19HP - Hopewell/Prince George	10,046.62
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19PT - Petersburg Counseling	15,863.13
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19SC - Surry	621.42
Pharmaceuticals and Supplies for 11/1/14 to 11/30/14 - 19SW - Sussex/Waverly	2,111.25
Medical Supplies - 19PT	24.15
Rx6032778 - Mark Sharbono - 11/14/14 - Divalprocx DR 500mg	4.00
Sales Tax	0.00
Total	\$37,875.38

Phone #	Fax #
(804) 288-1933	(804) 288-1508



Westwood Pharmacy Clinical Services
 5823 Patterson Avenue, Suite A
 Richmond, VA 23226

Invoice

Date	Invoice #
11/7/2014	13361

Bill To
Petersburg Counseling Services Attn: Karen Louis 20 West Bank Street, Suite 6 Petersburg, VA 23803

P.O. No.	Terms	Due Date	Account #
	Net 30	12/7/2014	

Description	Amount
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19CH - Colonial Heights	2,068.72
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19DW - Dinwiddie	4,146.59
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19GE - Greenville/Emporia	4,140.98
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19HP - Hopewell/Prince George	11,630.33
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19PT - Petersburg Counseling	14,138.64
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19SC - Surry	964.79
Pharmaceuticals and Supplies for 10/1/14 to 10/31/14 - 19SW - Sussex/Waverly	474.44
Medical Supplies - 19PT	71.14
Sales Tax	0.00
Total	\$37,635.63

Phone #	Fax #
(804) 288-1933	(804) 288-1508

WESTWOOD
3/1/2015

Drug Utilization
Fill Date(s) 11/1/2014 - 1/31/2015

Page 1
10:46 am

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
WESTWOOD - Pharmacy									
ABILIFY 10MG TAB							3	0.32	90
AMITRIPTYLINE 100MG TAB							2	0.21	58
AMITRIPTYLINE HCL 50 MG TAB 50 MG							1	0.11	28
BENZTROPINE 2MG TAB							3	0.32	180
BUPROPION XL 150MG TAB							2	0.21	60
BUPROPN HCL 300MG XL TAB							4	0.42	97
DIVALPROEX 250MG DR TAB							3	0.32	67
DIVALPROEX 500MG DR TAB							8	0.84	450
DULOXETINE 30MG CAP							1	0.11	7
DULOXETINE 60MG CAP							1	0.11	23
DULOXETINE 60MG CAP 60 MG							2	0.21	120
ESCITALOPRAM 10MG TAB							1	0.11	14
ESCITALOPRAM 20MG TAB							1	0.11	30
HALOPER DEC 50MG/ML							1	0.11	1
HALOPERIDOL 5MG TAB 5 MG							1	0.11	60
HALOPERIDOL DEC 100MG/ML 100MG/M							1	0.11	1
HYDROXYZ PAMOATE 25MG CAP							2	0.21	150
MIRTAZAPINE 30MG TAB							1	0.11	30
MIRTAZAPINE 30 MG TABLET 30 MG							3	0.32	90

WESTWOOD
3/1/2015

Drug Utilization
Fill Date(s) 11/1/2014 - 1/31/2015

Page 2
10:46 am

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		NALTREXONE 50MG TAB					3	0.32	90
		OLANZAPINE 15MG TAB					1	0.11	30
		OLANZAPINE 15 MG TABLET 15 MG					2	0.21	60
		PRAZOSIN HCL 1MG CAP					1	0.11	30
		PRAZOSIN HCL 5MG CAP					2	0.21	60
		PRISTIQ 50MG TAB					1	0.11	30
		PROPRANOLOL 10MG TAB					3	0.32	180
		QUETIAPINE 200MG TAB					3	0.32	90
		SERTRALINE 50MG TAB					1	0.11	5
		TOPIRAMATE 100MG TAB					5	0.53	328
		TOPIRAMATE 25MG TAB					1	0.11	30
		TOPIRAMATE 50MG TAB					3	0.32	74
		TRAZODONE 100MG TAB					9	0.95	315
		TRAZODONE 50MG TAB					6	0.63	210
		VENLAFAXINE 37.5MG TAB					1	0.11	60
		VENLAFAXINE 75MG TAB					1	0.11	83
		VENLAFAXINE ER 150MG CAP					1	0.11	30
		VENLAFAXINE HCL ER 225 MG TAB					1	0.11	20
		VENLAFAXINE HCL ER 75MG CAP					1	0.11	15
		VIIBRYD 20MG TAB					3	0.32	90

WESTWOOD
3/1/2015

Drug Utilization
Fill Date(s) 11/1/2014 - 1/31/2015

Page 3
10:46 am

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	FiL	Dsp
		ZIPRASIDONE 40MG CAP					1	0.11	60
		ABILIFY 10MG TAB					1	0.11	30
		ABILIFY 15MG TAB					3	0.32	90
		ABILIFY 2MG TAB					2	0.21	60
		ABILIFY 5MG TAB					3	0.32	90
		AMITRIPTYLINE 100MG TAB					3	0.32	180
		BUPROPION 200MG SR TAB					3	0.32	180
		BUPROPION HCL 150MG XL TAB					3	0.32	90
		BUPROPN HCL 300MG XL TAB					3	0.32	90
		CITALOPRAM 10MG TAB					2	0.21	60
		CITALOPRAM 20MG TAB					2	0.21	60
		CITALOPRAM 40MG TAB					3	0.32	90
		CLOMIPRAMINE 50MG CAP					1	0.11	30
		DIVALPROEX 500MG DR TAB					4	0.42	300
		DIVALPROEX SODIUM ER 500MG ER TAB					3	0.32	330
		DULOXETINE 60MG CAP 60 MG					2	0.21	120
		FLUOXETINE 40MG CAP					3	0.32	90
		HYDROXYZ PAMOATE 25MG CAP					2	0.21	120
		HYDROXYZINE PAM 50MG CAP					5	0.53	270

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
LATUDA 80MG TAB							3	0.32	90
LITHIUM CARB 300MG CAP							1	0.11	90
MIRTAZAPINE 15MG TAB							1	0.11	30
MIRTAZAPINE 30MG TAB							3	0.32	62
MIRTAZAPINE 45MG TAB							6	0.63	180
OLANZAPINE 20MG TAB							1	0.11	30
OLANZAPINE 5MG TAB							1	0.11	30
OLANZAPINE 7.5MG TAB							1	0.11	30
OLANZAPINE 5MG TAB 5 MG							1	0.11	30
PAROXETINE 10MG TAB							1	0.11	30
PAROXETINE 30MG TAB							2	0.21	120
PAROXETINE 40MG TAB							3	0.32	90
PROPRANOLOL 10MG TAB							4	0.42	270
QUETIAPINE 100MG TAB							4	0.42	120
QUETIAPINE 200MG TAB							3	0.32	90
RISPERIDONE 1MG TAB							3	0.32	97
TRAZODONE 100MG TAB							3	0.32	90
TRAZODONE 50MG TAB							1	0.11	30
VENLAFAXINE ER 150MG CAP							1	0.11	30
VENLAFAXINE ER 37.5 MG CAP							1	0.11	7
ZIPRASIDONE 40MG CAP							2	0.21	120

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		ZIPRASIDONE 80MG CAP					2	0.21	120
		ABILIFY 10MG TAB					2	0.21	60
		ABILIFY 5MG TAB					2	0.21	60
		AMITRIPTYLINE 50MG TAB					1	0.11	30
		BENZTROPINE 0.5MG TAB					2	0.21	60
		BENZTROPINE 1MG TAB					2	0.21	150
		BUPROPION 100MG SR TAB					1	0.11	60
		BUPROPN HCL 300MG XL TAB					1	0.11	30
		BUSPIRONE 10MG TAB					1	0.11	60
		CITALOPRAM 20MG TAB					1	0.11	30
		DIPHENHYDRAMINE 50 MG CAP					1	0.11	30
		DONEPEZIL 10MG TAB					1	0.11	30
		DULOXETINE 60MG CAP					1	0.11	30
		DULOXETINE 30MG CAP 30 MG					1	0.11	7
		DULOXETINE 60MG CAP 60 MG					5	0.53	150
		ESCITALOPRAM 20MG TAB					1	0.11	30
		FLUOXETINE 20MG CAP					1	0.11	30
		FLUOXETINE 20MG CAP 20 MG					1	0.11	90
		HALOPER DEC 100MG/ML					1	0.11	1

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		HALOPERIDOL 5MG TAB 5 MG					1	0.11	30
		HYDROXYZ PAMOATE 25MG CAP					1	0.11	30
		HYDROXYZINE HCL 50 MG TABLE 50 MG					1	0.11	90
		HYDROXYZINE PAM 50MG CAP					6	0.63	510
		LAMOTRIGINE 100MG TAB					1	0.11	60
		LATUDA 20MG TAB					2	0.21	60
		LITHIUM CARB 300MG ER TAB					1	0.11	60
		MIRTAZAPINE 45MG TAB					2	0.21	60
		OLANZAPINE 10MG TAB					1	0.11	30
		PAROXETINE 20MG TAB					2	0.21	60
		QUETIAPINE 100MG TAB					2	0.21	300
		QUETIAPINE 200MG TAB					3	0.32	90
		QUETIAPINE 50 MG TAB					1	0.11	150
		RISPERIDONE 2MG TAB					4	0.42	150
		RISPERIDONE 3MG TAB					2	0.21	60
		SERTRALINE 50MG TAB					2	0.21	60
		TRAZODONE 100MG TAB					7	0.74	240
		TRAZODONE 50MG TAB					6	0.63	285
		VENLAFAXINE ER 150MG CAP					2	0.21	60
		VENLAFAXINE ER 75 MG CAP					4	0.42	97

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		ABILIFY 10MG TAB					10	1.05	300
		ABILIFY 15MG TAB					1	0.11	30
		ABILIFY 20MG TAB					3	0.32	90
		ABILIFY 5MG TAB					6	0.63	180
		AMITRIPTYLINE 50MG TAB					1	0.11	60
		BENZTROPINE 1MG TAB					2	0.21	90
		BUPROPION HCL 150MG XL TAB					3	0.32	90
		BUPROPN HCL 300MG XL TAB					2	0.21	60
		BUSPIRONE 30MG TAB					1	0.11	60
		CARBAMAZEPIN 100MG TAB					5	0.53	150
		CARBAMAZEPINE 200 MG					4	0.42	120
		CARBAMAZEPINE 200MG TAB					1	0.11	30
		CITALOPRAM 20MG TAB					2	0.21	60
		DIPHENHYDRAMINE 25MG CAP					2	0.21	60
		DIVALPROEX 500MG DR TAB					5	0.53	300
		DIVALPROEX SODIUM ER 500MG ER TAB					7	0.74	270
		DULOXETINE 30MG CAP					1	0.11	30

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fi	Dsp
		DULOXETINE 60MG CAP					2	0.21	90
		DULOXETINE 30MG CAP 30 MG					3	0.32	114
		DULOXETINE 60MG CAP 60 MG					6	0.63	240
		ESCITALOPRAM 10MG TAB					3	0.32	90
		FLUOXETINE 20MG CAP					1	0.11	30
		FLUOXETINE 40MG CAP					3	0.32	180
		FLUOXETINE 20MG CAP 20 MG					3	0.32	90
		GUANFACINE 1MG TAB					2	0.21	236
		GUANFACINE 2MG TAB					1	0.11	120
		HALOPERIDOL 10MG TAB					5	0.53	150
		HALOPERIDOL 1MG TAB					1	0.11	30
		HALOPERIDOL 5MG TAB 5 MG					3	0.32	120
		HYDROXYZ PAMOATE 25MG CAP					2	0.21	120
		INVEGA SUST 117/0.75 INJ					1	0.11	0.75
		LAMOTRIGINE 200MG TAB					3	0.32	90
		LAMOTRIGINE 25MG TAB					2	0.21	60
		LATUDA 20MG TAB					1	0.11	30
		LATUDA 40MG TAB					5	0.53	150
		LATUDA 80MG TAB					2	0.21	60
		LATUDA 60 MG TABLET 60 MG					2	0.21	60

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
LITHIUM CARB	300MG CAP						4	0.42	270
LITHIUM CARB	600MG CAP						2	0.21	120
MIRTAZAPINE	15MG TAB						3	0.32	90
MIRTAZAPINE	30MG TAB						4	0.42	120
MIRTAZAPINE	45MG TAB						5	0.53	150
NALTREXONE	50MG TAB						1	0.11	30
OLANZAPINE	10MG TAB						1	0.11	30
OLANZAPINE	15MG TAB						1	0.11	45
OLANZAPINE	20MG TAB						4	0.42	120
OLANZAPINE	7.5MG TAB						1	0.11	30
OXCARBAZEPIN	600MG TAB						2	0.21	60
PAROXETINE	10MG TAB						1	0.11	0
PAROXETINE	20MG TAB						3	0.32	90
PAROXETINE	40MG TAB						3	0.32	90
PRAZOSIN HCL	1MG CAP						6	0.63	180
PRAZOSIN HCL	2MG CAP						1	0.11	30
PRAZOSIN HCL	5MG CAP						3	0.32	90
QUETIAPINE	100MG TAB						4	0.42	120
QUETIAPINE	200MG TAB						1	0.11	30
QUETIAPINE	50 MG TAB						1	0.11	30
QUETIAPINE	50MG TAB						1	0.11	30

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		RISPERIDONE 1MG TAB					3	0.32	180
		RISPERIDONE 2MG TAB					5	0.53	150
		RISPERIDONE 4MG TAB					3	0.32	90
		SERTRALINE 100MG TAB					6	0.63	180
		TOPIRAMATE 100MG TAB					1	0.11	60
		TOPIRAMATE 50MG TAB					2	0.21	120
		TRAZODONE 100MG TAB					16	1.69	600
		TRAZODONE 150MG TAB					2	0.21	60
		TRAZODONE 150MG TAB					7	0.74	270
		TRAZODONE 50MG TAB					7	0.74	210
		VENLAFAXINE ER 150MG CAP					1	0.11	60
		VENLAFAXINE ER 75 MG CAP					2	0.21	60
		ZIPRASIDONE 80MG CAP					3	0.32	180
		ABILIFY 10MG TAB					4	0.42	120
		ABILIFY 15MG TAB					1	0.11	30
		ABILIFY 20MG TAB					7	0.74	210
		ABILIFY 5MG TAB					6	0.63	157
		ABILIFY MAINTENA ER 400 MG 400 MG					3	0.32	3
		BENZTROPINE 0.5MG TAB					11	1.16	480

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		BENZTROPINE 2MG TAB					3	0.32	180
		BUPROPION 100MG TAB					1	0.11	90
		BUPROPION 100MG SR TAB					1	0.11	60
		BUPROPION 200MG SR TAB					1	0.11	60
		BUPROPION 75MG TAB					5	0.53	360
		BUSPIRONE 10MG TAB					1	0.11	90
		BUSPIRONE 15MG TAB					2	0.21	180
		CARBAMAZEPIN 100MG TAB					2	0.21	60
		CARBAMAZEPINE 200 MG					2	0.21	60
		CITALOPRAM 20MG TAB					6	0.63	192
		CITALOPRAM 40MG TAB					4	0.42	120
		CLONIDINE 0.1MG TAB					1	0.11	30
		CLOZAPINE 100MG TAB					2	0.21	112
		CLOZAPINE 200MG TAB					4	0.42	112
		CLOZAPINE 25MG TAB					2	0.21	56
		DIPHENHYDRAMINE 50 MG CAP					3	0.32	90
		DIVALPROEX 250MG DR TAB					2	0.21	120
		DIVALPROEX 250MG ER TAB					5	0.53	420
		DIVALPROEX 500MG DR TAB					8	0.84	480
		DOXEPIN HCL 75MG CAP					2	0.21	60

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		ESCITALOPRAM 10MG TAB					2	0.21	60
		FLUOXETINE 20MG CAP					1	0.11	90
		FLUOXETINE 40MG CAP					2	0.21	60
		FLUOXETINE 20MG CAP 20 MG					2	0.21	180
		FLUPHENAZINE 5MG TAB					3	0.32	210
		FLUPHENAZINE DECANOATE 25MG/ML INJ					1	0.11	5
		GABAPENTIN 300 MG CAP					1	0.11	60
		GUANFACINE 1MG TAB					1	0.11	60
		HALOPER DEC 100MG/ML					2	0.21	2
		HALOPER DEC 50MG/ML					2	0.21	2
		HALOPERIDOL 10MG TAB					2	0.21	60
		HALOPERIDOL 2MG TAB					1	0.11	30
		HALOPERIDOL 5MG TAB					1	0.11	30
		HALOPERIDOL 5MG TAB 5 MG					1	0.11	30
		HALOPERIDOL DEC 100MG/ML 100 MG/					1	0.11	1
		HYDROXYZ PAMOATE 25MG CAP					9	0.95	720
		HYDROXYZINE PAM 50MG CAP					6	0.63	420
		INVEGA SUST 117/0.75 INJ					4	0.42	3
		LATUDA 120MG TAB					1	0.11	30
		LATUDA 120 MG TABLET 120 MG					3	0.32	90
		LITHIUM CARB 150MG CAP					1	0.11	60

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fill	Dsp
		LITHIUM CARB 300MG CAP					5	0.53	300
		LITHIUM CARB 600MG CAP					2	0.21	60
		MIRTAZAPINE 45MG TAB					1	0.11	30
		NALTREXONE 50MG TAB					1	0.11	30
		OLANZAPINE 10MG TAB					2	0.21	120
		OLANZAPINE 20MG TAB					1	0.11	30
		OLANZAPINE 20MG ODT TAB					1	0.11	30
		OLANZAPINE 5MG TAB					1	0.11	60
		PAROXETINE 40MG TAB					3	0.32	74
		PRazosin HCL 1MG CAP					1	0.11	30
		PRazosin HCL 2MG CAP					4	0.42	120
		PRazosin HCL 5MG CAP					1	0.11	30
		QUETIAPINE 100MG TAB					10	1.05	689
		QUETIAPINE 200MG TAB					4	0.42	134
		QUETIAPINE 300MG TAB					2	0.21	30
		QUETIAPINE 400MG TAB					2	0.21	60
		QUETIAPINE 50 MG TAB					3	0.32	72
		QUETIAPINE 50MG TAB					1	0.11	30
		RISPERDAL 12.5MG INJ					3	0.32	4
		RISPERDAL 37.5MG INJ					2	0.21	4
		RISPERIDONE 0.5MG TAB					2	0.21	60

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fil	Dsp
		RISPERIDONE 1MG TAB					13	1.37	690
		RISPERIDONE 2MG TAB					8	0.84	360
		RISPERIDONE 3MG TAB					3	0.32	90
		RISPERIDONE 4MG TAB					2	0.21	60
		SERTRALINE 100MG TAB					11	1.16	690
		SERTRALINE 25MG TAB					3	0.32	102
		SERTRALINE 50MG TAB					5	0.53	147
		TOPIRAMATE 200MG TAB					3	0.32	135
		TOPIRAMATE 25MG TAB					2	0.21	90
		TOPIRAMATE 50MG TAB					1	0.11	28
		TRAZODONE 100MG TAB					13	1.37	420
		TRAZODONE 150MG TAB					1	0.11	15
		TRAZODONE 150MG TAB					4	0.42	105
		TRAZODONE 50MG TAB					14	1.48	420
		TRIHEXYPHEN 5MG TAB					2	0.21	150
		VENLAFAXINE 50MG TAB					1	0.11	30
		VENLAFAXINE 75MG TAB					3	0.32	120
		VENLAFAXINE ER 150MG CAP					2	0.21	120
		VENLAFAXINE HCL ER 150MG CAP					3	0.32	105
		ZIPRASIDONE 40MG CAP					3	0.32	180

Patient	Pat #	Drug	Doctor	DEA	Rx #	Fill	Fills	Fil	Dsp
		AMITRIPTYLINE 100MG TAB					1	0.11	30
		AMITRIPTYLINE 150MG TAB					1	0.11	60
		AMITRIPTYLINE 50MG TAB					1	0.11	60
		BUSPIRONE 15MG TAB					3	0.32	180
		DIVALPROEX SODIUM ER 500MG ER TAB					3	0.32	180
		FLUOXETINE 40MG CAP					1	0.11	30
		HYDROXYZ PAMOATE 25MG CAP					3	0.32	285
		LATUDA 80MG TAB					3	0.32	69
		MIRTAZAPINE 30MG TAB					6	0.63	180
		PAROXETINE 10MG TAB					3	0.32	90
		PAROXETINE 40MG TAB					3	0.32	90
		RISPERIDONE 1MG TAB					2	0.21	120
		RISPERIDONE 4MG TAB					1	0.11	30
		SERTRALINE 50MG TAB					3	0.32	90
		TRAZODONE 150MG TAB					1	0.11	30

Patient Count: 169