# UNITED STATES OF AMERICA BEFORE THE FEDERAL TRADE COMMISSION OFFICE OF THE ADMINISTRATIVE LAW JUDGE

In the Matter of

**BENCO DENTAL SUPPLY CO.,** a corporation,

HENRY SCHEIN, INC., a corporation, and

Docket No. 9379

10 2018

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SECRETARY

ORIGINAL

**PATTERSON COMPANIES, INC.,** a corporation,

**Respondents.** 

# **RESPONDENT HENRY SCHEIN, INC.'S MOTION TO ADMIT RX2933**

Pursuant to Commission Rule 3.43(b) (16 C.F.R. § 3.43(b)), Respondent Henry Schein, Inc. respectfully moves for admission of RX2933-001 into evidence. (Attached as Ex. 1). RX-2933 is a May 8, 2017 sworn declaration from James Breslawski, President of Henry Schein, Inc. ("Schein") submitted in *In re Dental Supplies Antitrust Litigation*, 16-cv-00969-BMC-GRB, Dkt. No. 188-5 (E.D.N.Y.). (the "Breslawski Declaration").

The Commission Rules allow for admission of relevant prior testimony from other proceedings. 16 C.F.R. § 3.43(b). In the absence of consent from the parties, admission is appropriate where "the prior testimony would not be duplicative, would not present unnecessary hardship to a party or delay the proceedings, and would aid in the determination of the matter." *Id.* The Breslawski Declaration satisfies those criteria.

*First*, the Declaration is directly relevant to the issues in this case, and will thus aid in the determination of the matter. Schein is more than just a distributor of dental supplies; it operates a medical supplies business and a veterinary supplies business, among others. Based

on his personal knowledge and decades of experience working for and leading Schein (including both medical and dental sides of the company), Mr. Breslawski's Declaration provides, under penalty of perjury, critical insight into competition and pricing in the medical and dental markets. Specifically, Mr. Breslawski explained how the "separate and independent field sales organizations, management, employees, business strategies, market approaches, customers, competitive dynamics, market segment pricing, key suppliers, and cost structures," between medical and dental make a comparison between the two irrelevant and "misleading." RX2933 at ¶¶ 2, 5.

This testimony is particularly apropos here given Complaint Counsel's – and their expert's – attempt to analogize dental group purchasing organizations to medical GPOs. The Breslawski Declaration directly addresses those claims, and helps explain why GPOs are more prevalent in the medical space than in dental. 16 C.F.R. § 3.43(b); Fed. R. Evid. 401 (Evidence is relevant if it has any tendency to make a fact of consequence to the determination of the action more or less probable.). This evidence is particularly important because Complaint Counsel's expert, Dr. Marshall, opines that his "predictions ... are validated" by his interpretation of the "literature on medical GPOs," a field about which Dr. Marshall has no knowledge and has never studied. *See* CX 7100, ¶ 485. Nonetheless, Complaint Counsel makes over a dozen references to the medical industry in its pretrial brief. The Breslawski Declaration is critical.

*Second*, the Breslawski Declaration is not duplicative. It is Mr. Breslawski's only prior sworn statement on the distinguishing features of the medical and dental businesses, as Complaint Counsel declined to ask him about it at his deposition.

*Third*, admission of the Breslawski Declaration would not present any unnecessary hardship on Complaint Counsel. Mr. Breslawski has been on Complaint Counsel's witness lists

from the beginning; his Declaration has been publicly available since May 2017; and Schein affirmatively directed Complaint Counsel to the public docket in *In re Dental Supplies Antitrust Litigation*.

Complaint Counsel deposed Mr. Breslawski on July 10, 2018 and could have asked about his Declaration if they wished. They chose not to. Mr. Breslawski is also on Complaint Counsel's final witness list. They are free call Mr. Breslawski to inquire about his Declaration. Admission of the Declaration accordingly poses no hardship or delay.

For these reasons, Respondent Henry Schein, Inc. respectfully requests that the Court admit RX2933.

Dated: October 10, 2018

Respectfully submitted,

<u>/s/ John P. McDonald</u> John P. McDonald jpmcdonald@lockelord.com LOCKE LORD LLP 2200 Ross Avenue, Suite 2800 Dallas, TX 75201 (214) 740-8000 (Telephone) (214) 740-8800 (Facsimile)

Lauren M. Fincher <u>lfincher@lockelord.com</u> LOCKE LORD LLP 600 Congress Avenue, Suite 2200 Austin, Texas 78701 512-305-4700 (Telephone) 512-305-4800 (Facsimile)

Colin R. Kass <u>ckass@proskauer.com</u> Adrian Fontecilla <u>afontecilla@proskauer.com</u> PROSKAUER ROSE LLP 1001 Pennsylvania Ave., NW Suite 600 South Washington, DC 20004 Telephone: (202) 416-6800 Fax: (202) 416-6899

Tim Muris <u>tmuris@sidley.com</u> SIDLEY AUSTIN LLP 1501 K Street, N.W. Washington, D.C. 20005 Telephone: (202) 736-8000 Facsimile: (202) 736-8711

ATTORNEYS FOR RESPONDENT HENRY SCHEIN, INC.

# UNITED STATES OF AMERICA BEFORE THE FEDERAL TRADE COMMISSION OFFICE OF THE ADMINISTRATIVE LAW JUDGES

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**BENCO DENTAL SUPPLY CO.,** a corporation,

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**PATTERSON COMPANIES, INC.,** a corporation.

# [PROPOSED] ORDER

After reviewing Respondent Henry Schein Inc.'s Motion Pursuant to Rule 3.43(b) to Admit

Prior Testimony from Other Proceedings, it is hereby ordered that RX2933 be admitted.

D. Michael Chappell Chief Administrative Law Judge

# UNITED STATES OF AMERICA BEFORE THE FEDERAL TRADE COMMISSION OFFICE OF THE ADMINISTRATIVE LAW JUDGES

In the Matter of

**BENCO DENTAL SUPPLY CO.,** a corporation,

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# <u>STATEMENT REGARDING MEET AND CONFER</u> <u>PURSUANT TO 16 C.F.R. § 3.22(g)</u>

Respondent Henry Schein, Inc. ("Schein"), respectfully submits this Statement, pursuant

to Rule 3.22(g) of the Federal Trade Commission's Rules of Adjudicative Practice.

Schein has met and conferred in good faith with Complaint Counsel in an effort to reach a mutually acceptable agreement on the admissibility of RX2933. The parties have engaged in three phone conferences over the past week to discuss their respective positions, but the parties have been unable to come to an agreement.

Dated: October 10, 2018

Respectfully submitted,

/s/ John P. McDonald John P. McDonald jpmcdonald@lockelord.com LOCKE LORD LLP 2200 Ross Avenue, Suite 2800 Dallas, TX 75201 (214) 740-8000 (Telephone) (214) 740-8800 (Facsimile)

Lauren M. Fincher

Ifincher@lockelord.com LOCKE LORD LLP 600 Congress Avenue, Suite 2200 Austin, Texas 78701 512-305-4700 (Telephone) 512-305-4800 (Facsimile)

Colin R. Kass <u>ckass@proskauer.com</u> Adrian Fontecilla <u>afontecilla@proskauer.com</u> PROSKAUER ROSE LLP 1001 Pennsylvania Ave., NW Suite 600 South Washington, DC 20004 Telephone: (202) 416-6800 Fax: (202) 416-6899

Tim Muris <u>tmuris@sidley.com</u> SIDLEY AUSTIN LLP 1501 K Street, N.W. Washington, D.C. 20005 Telephone: (202) 736-8000 Facsimile: (202) 736-8711

ATTORNEYS FOR RESPONDENT HENRY SCHEIN, INC.

#### **CERTIFICATE OF SERVICE**

I hereby certify that on October 10, 2018, I filed the foregoing document electronically using the FTC's E-Filing System, which will send notification of such filing to:

Donald S. Clark Secretary Federal Trade Commission 600 Pennsylvania Ave., NW, Rm.H-113 Washington, DC 20580

The Honorable D. Michael Chappell Administrative Law Judge Federal Trade Commission 600 Pennsylvania Ave., NW, Rm. H-110 Washington, DC 20580

I further certify that I delivered via electronic mail a copy of the foregoing document to:

Lin W. Kahn lkahn@ftc.gov Jeanine K. Balbach jbalbach@ftc.gov Thomas H. Brock tbrock@ftc.gov **Emily Burton** eburton@ftc.gov Diana Change dchange@ftc.gov Thomas Dahdouh tdahdough@ftc.gov Thomas Dillickrath tdillickrath@ftc.gov Karen Goff kgoff@ftc.gov Joseph Goodman jgoodman@ftc.gov Jessica Moy jmoy@ftc.gov Danica Noble dnoble@ftc.gov Jasmine Y. Rosner jrosner@ftc.gov **Ronnie Solomon** rsolomon@ftc.gov John Wiegand

jwiegand@ftc.gov Erika Wodinsky ewodinsky@ftc.gov Federal Trade Commission Western Region – San Francisco 901 Market Street, Suite 570 San Francisco, CA 94103 Telephone: (415) 848-5115

# Counsel Supporting the Complaint

Howard Scher howard.scher@bipc.com Kenneth Racowski kenneth.racowski@bipc.com Carrie Amezcua carrie.amezcua@bipc.com Buchanan Ingersoll & Rooney PC 50 S. 16th Street Suite 3200 Philadelphia, PA 19102

Geoffrey D. Oliver gdoliver@jonesday.com Jones Day 51 Louisiana Avenue NW Washington, DC 20001 Phone Number: 202-879-3939

Craig A. Waldman cwaldman@jonesday.com Benjamin M. Craven bcraven@jonesday.com Ausra O. Deluard adeluard@jonesday.com Jones Day 555 California Street 26th Floor San Francisco, CA 94104 Phone Number: 415-626-3939

### Counsel for Respondent Benco Dental Supply Company

James Long(Attorney) jlong@briggs.com Jay Schlosser(Attorney) jschlosser@briggs.com Scott Flaherty(Attorney) sflaherty@briggs.com Ruvin Jayasuriya(Attorney) rjayasuriya@briggs.com William Fitzsimmons(Attorney) wfitzsimmons@briggs.com Briggs and Morgan, P.A. 2200 IDS Center 80 South Eighth Street Minneapolis, MN 55402 Phone Number: 612-977-8400 Fax Number: 612-977-8650

Joseph Ostoyich joseph.ostoyich@bakerbotts.com William Lavery william.lavery@bakerbotts.com Andrew George andrew.george@bakerbotts.com Jana Seidl jana.seidl@bakerbotts.com Kristen Lloyd kristen.lloyd@bakerbotts.com Baker Botts L.L.P. 1299 Pennsylvania Ave NW Washington, DC 20004 Phone Number: 202-639-7905

Counsel for Respondent Patterson Companies, Inc.

By: /s/ Owen T. Masters

Attorney

# **CERTIFICATE OF ELECTRONIC FILING**

I certify that the electronic copy sent to the Secretary of the Commission is a true and correct copy of the paper original and that I possess a paper original of the signed documents that is available for review by the parties and the adjudicator.

October 10, 2018

By: /s/ Owen T. Masters Attorney

# EXHIBIT 1

# UNITED STATES DISTRICT COURT EASTERN DISTRICT OF NEW YORK

# In re DENTAL SUPPLIES ANTITRUST LITIGATION

No. 1:16-cv-696-BMC-GRB

### **DECLARATION OF JAMES BRESLAWSKI**

I, James Breslawski, hereby declare under penalty of perjury as follows:

1. I am the President of Henry Schein, Inc. ("Schein"). I have been employed by Schein since 1980. Over the years, I have held various positions, including Controller, Chief Financial Officer, President of Schein's U.S. Dental business, President of Schein's North American distribution business, and President of Schein's global dental business. I am submitting this declaration, based on my own personal knowledge, to address class counsel's request for discovery into Schein's medical distribution business.<sup>1</sup>

2. Schein's medical and dental businesses are entirely separate and distinct businesses, with separate and independent field sales organizations, management, employees, business strategies, market approaches, customers, competitive dynamics, market segment pricing, key suppliers, and cost structures. Most of the data systems and support functions are distinct. To the extent there is any overlap across the different businesses, it is limited to certain common warehousing facilities and back-office functions.

<sup>&</sup>lt;sup>1</sup> I understand that Tony Johnson, Vice President of Sales Operations & Sales Compensation at Henry Schein Animal Health, is also submitting a declaration to address Schein's animal health distribution business. I note that Schein's animal health business is a separate legal entity, which does not report to me, and while it is majority owned by Schein, it is not wholly owned by Schein.

3. I understand that class counsel has suggested that juxtaposing Schein's prices or margins in the dental distribution business against the prices or margins in the medical business would be a relevant comparison in this case. While I do not offer any opinions concerning what may be legally relevant, in my view the differences between the two businesses would make any comparison essentially meaningless. As described below, the many differences include:

- <u>Customer size.</u> Our medical customers are generally in the business of providing healthcare to the public. In today's market, healthcare is typically delivered via a formal or informal interconnected network of healthcare providers and facilities, with most procedures (generating the most significant need for supplies) taking place at large facilities (*e.g.*, large, centrally controlled health systems, surgery centers, and hospitals). In contrast, most dental procedures take place at small dental offices. The larger medical facilities can generally be supplied at lower gross margin *percentages* because they generate higher gross margin *dollars* (*i.e.*, gross profit dollars) and cost less to serve on a per unit basis. The size of medical facilities also gives them greater ability to switch significant sales from one manufacturer to another, which has implications for medical pricing. This dynamic is absent from the dental business.
- <u>Nature and mix of services.</u> There are significant differences in the nature of the services provided by, and to, physician offices and dental offices. For example, unlike physician offices, dental practices tend to use mechanical equipment with virtually every patient visit, resulting in significant wear and tear to such equipment. Accordingly, one of the many reasons why dentists use Schein as a "primary" dental distributor is because it services equipment. Schein's dental business has built an entire infrastructure devoted to dental equipment sales and service that does not exist in medical because there is not the same demand for it there. Schein's costs in the dental business include tens of millions of dollars to provide equipment and other services, including specially trained personnel, delivery and service vans, showrooms, and branch support facilities. Schein, however, does not generally provide equipment services to its medical customers.
- <u>Nature and mix of products.</u> There is also little overlap in the products purchased by dental and medical practices, and to the extent there are "cross-over" products, they are not representative of the overall needs of the respective practices.
- 4. Put simply, there are no similarities between these distinct businesses from which

Schein could draw meaningful parallels or relevant comparisons. For this reason, when making

general business, pricing, or other strategic decisions in our medical business, we do not look at or consider the dental business.<sup>2</sup>

5. Moreover, even if such comparisons were possible, investigating, explaining, and understanding the necessary facts underlying pricing, costs, margins, and other aspects of Schein's medical business would be incredibly onerous and expensive. Fully understanding the differences between the dental and medical businesses would require extensive investigation of entirely different sets of employees and operations. Although I understand the class's document requests to be limited to transactional data, any meaningful comparison (if such a comparison were even possible) would require a more fulsome investigation of the dynamics summarized above. Already, the level of discovery into Schein's dental distribution business in this case has been incredibly burdensome. To require Schein to repeat the process of identifying, collecting, and producing that discovery for its medical business would impose additional significant expenses on the company, and still would likely result in misleading comparisons.

# A. Most Supply- and Equipment-Intensive Procedures in Medical Markets Occur at Significantly Larger Facilities than in Dental Markets.

6. Many of the supply- and equipment-intensive procedures in the medical industry take place in hospitals, which tend to operate at the center of a healthcare network. Hospitals are large purchasers, often requiring pallet-sized deliveries of medical supplies. While Schein does not serve hospitals, it does serve other facilities within health systems, such as ambulatory

<sup>&</sup>lt;sup>2</sup> During my deposition in this case, class counsel showed me a document that addressed a concern about Schein's medical field sales representatives selling *dental* products to *dentists*, but not at the prices established by the dental division. As I explained, this arises because Schein has not restricted field sales representatives' ability to sell any product to anyone, and has provided each of its representatives with substantial flexibility to set prices. This, however, does not suggest that Schein sets dental prices with reference to medical, or vice versa. Nor does it suggest that one market is more "competitive" than another. It simply shows that Schein has different pricing strategies for dentists and medical providers, which is consistent with the vast differences between these two markets.

surgical centers and outpatient clinics. Like hospitals, these types of facilities tend to be large, with extensive equipment and supply needs.

7. There are significant differences in the services that Schein provides to these types of medical customers and the services that it provides to dental customers. Schein generally does not service medical equipment. Rather, most medical equipment, even if sold by Schein, is serviced directly by the manufacturer. This contrasts with Schein's dental business, where Schein is both a primary seller and servicer of dental equipment.

8. With regard to supplies, ambulatory surgical centers and outpatient clinics typically have much larger – and different – requirements than dental or physician offices. Not only are the medical facilities larger, with the capacity for larger deliveries, they now provide many of the complex procedures that previously were performed on an in-patient basis at hospitals. Accordingly, the suite of supplies required at these larger facilities is very different than at dental offices

9. This dynamic gives rise to at least two significant differences between the medical and dental distribution markets. *First*, because of the larger volume at outpatient clinics and ambulatory surgical centers (and even large group physician practices), the *individual* customer – the clinic or surgical center – has the ability to shift significant volume from one manufacturer to another, which may give rise to a high degree of purchasing power. This power may be enhanced to the extent such facilities are affiliated with hospitals in large health systems, allowing them to leverage the hospital's volume to secure concessions from manufacturers and others.

10. Second, the per unit costs to Schein of serving medical customers like outpatient clinics and surgical centers are typically lower than the costs of serving small physician or dental

offices. Such cost savings arise because (i) larger volumes can be delivered to a single location (reducing the per unit shipping and other fulfillment costs), and (ii) as sophisticated purchasers, there is less (if any) need for the services of a field sales representative. This means that while the "gross margin *percentage*" that distributors charge medical customers may be relatively low, the "gross margin *dollars*" (or gross profit dollars) can be large.

# B. There Are Significant Differences in the Nature and Mix of Products Provided to Medical and Dental Offices.

11. Even at independent physician offices, there is little or no meaningful comparison that can be drawn between the medical and dental markets. As an initial matter, the nature and mix of the products and services are very different. There are hundreds or thousands of specialty products that are unique to the dental market, such as whitening supplies, toothpaste, implants, caps, and dental anesthesia (*e.g.*, Novocain), to name a few. The same is true in medical. EKG or ECG accessories, wound care, specimen collection, diagnostic and testing supplies, pharmaceuticals, and vaccines are, among other products, generally unique to the medical profession. Indeed, pharmaceuticals and vaccines, which tend to be lower gross margin products, make up a significant portion of the products sold to our medical customers and drive much of the cost structure and margins in that market. These product differences have significant effects on average or aggregate gross margins.

12. One cannot simply ignore these differences by focusing on "cross-over" products, such as gloves or masks, which can be used in both the medical and dental businesses. Such cross-over products are not representative of a dentist's equipment or supply requirements. Moreover, even for the relatively few cross-over products, the *mix* of such products varies among different physicians and different dentists.

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13. At Schein, pricing is viewed both at an individual product level and across the customer relationship. This is because Schein incurs costs at the company level, the division level (*e.g.*, medical and dental), the regional level, the customer level, the shipment level, and the product level. A price, however, is just a price, and it must cover Schein's costs at each level. So, while Schein sometimes considers "gross margin *percentage*" as one metric, it also focuses on overall customer profitability and gross margin *dollars* (at the customer, region, and division level), as well as other factors. The overall customer numbers will depend not just on the perproduct margin percentage but also the volume and mix of products and services purchased by that customer.

14. Accordingly, one could not just look at the "cross-over" products to gain any meaningful connection between the level of "competition" and pricing in the medical and dental markets. Because the mix of products and services demanded by physicians and dentists differs, the gross margin percentage on a given cross-over product would not provide any insight into the degree of competition in one business versus the other.

# C. There Are Significant Differences in the Nature of the Services Provided to Medical and Dental Offices.

15. There are also significant differences in the nature of the services that Schein provides to physicians and dentists. Most dentists will contract with one or two full service dental distributors, and fill any remaining needs from various other supply and equipment providers. To be a primary or secondary dealer, the dealer must be able to offer a broad array of products and services, including equipment, equipment repair, supplies, and (increasingly) technology products and related I.T. services. For example, because dentists use mechanical dental equipment with virtually every patient visit – and because such equipment gets heavy use resulting in significant wear and tear – timely equipment service is an important component of

the package of services that Schein provides. In contrast, Schein generally does not provide equipment service to medical customers.

16. This difference in demand for full service offerings has significant implications for the costs of distribution in the two businesses. To provide equipment and other services to dental customers, Schein spends tens of millions of dollars each year. For example, Schein has a team of about 250 equipment sales specialists and 750 equipment service technicians located throughout the United States, whose sole responsibility is to sell and service dental equipment, respectively. Each of the dental equipment service technicians has a company-provided van so that they can quickly repair any broken equipment with minimal disruption to the dentist's The medical division, in contrast, employs approximately 42 equipment sales business. specialists nationwide. Reflecting the importance of equipment in the dental business, Schein maintains about 75 dental equipment showcase centers around the country. Schein also provides many business consulting services at no cost to the dentist, but which require Schein to hire and train sales consultants. In short, equipment and service is a significant driver in our dental business, while Schein does not incur these costs in providing distribution services to physician offices.

17. For that reason, Schein has been willing to accept lower margins on dental equipment because it can improve its chances of becoming a primary supplier, where the overall profitability of serving the customer is dependent on the margins earned across supplies, equipment, and technology. Thus, Schein's supplies business effectively subsidizes, or more accurately, bears a higher portion of overhead than, its equipment business. This dynamic, however, is not at play in the medical business.

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# D. Given the Complexity of the Medical Business, Any Comparison Between Dental and Medical Margin Percentages Would Be Misleading, and Any Attempt to "Investigate" The Differences Would Impose Substantial Burden on Schein.

18. As the above discussion demonstrates, the competitive dynamics that influence pricing in the medical market are exceedingly complex. While I have tried to give some of the flavor of those complexities, the reality is still more complex. Any superficial comparison of margin, cost, or pricing data between these businesses is likely to be fraught with speculation and misleading generalizations. Such data simply reflects the *outcome* of the final transaction flowing from all of the differences between these markets, and Schein's distinct business models in each market. Data alone does not provide insight into what aspect of the business contributes to increasing or decreasing volume, prices, or margins.

19. While I do not believe that any relevant comparison could be drawn between Schein's dental, medical, or animal health businesses, any attempt to even determine whether it could be done would require a level of discovery into these businesses that would be detrimental to Schein. The costs of discovery into Schein's dental distribution business have already been extremely burdensome. Schein has spent millions of dollars on discovery in this case. Engaging in the discovery necessary to analyze the differences among Schein's distinct dental, medical, and animal health businesses would involve significant and wasteful additional costs and burden.

I declare under penalty of perjury that the foregoing is true and correct.

Dated: May (, 2017

James Breslawski

# Notice of Electronic Service

I hereby certify that on October 10, 2018, I filed an electronic copy of the foregoing Respondent Henry Schein, Inc.'s Motion to Admit RX2933, with:

D. Michael Chappell Chief Administrative Law Judge 600 Pennsylvania Ave., NW Suite 110 Washington, DC, 20580

Donald Clark 600 Pennsylvania Ave., NW Suite 172 Washington, DC, 20580

I hereby certify that on October 10, 2018, I served via E-Service an electronic copy of the foregoing Respondent Henry Schein, Inc.'s Motion to Admit RX2933, upon:

Lin Kahn Attorney Federal Trade Commission lkahn@ftc.gov Complaint

Ronnie Solomon Attorney Federal Trade Commission rsolomon@ftc.gov Complaint

Matthew D. Gold Attorney Federal Trade Commission mgold@ftc.gov Complaint

John Wiegand Attorney Federal Trade Commission jwiegand@ftc.gov Complaint

Erika Wodinsky Attorney Federal Trade Commission Complaint

Boris Yankilovich Attorney Federal Trade Commission byankilovich@ftc.gov Complaint

Jeanine K. Balbach Attorney Federal Trade Commission jbalbach@ftc.gov Complaint Thomas H. Brock Attorney Federal Trade Commission TBrock@ftc.gov Complaint

Jasmine Rosner Attorney Federal Trade Commission jrosner@ftc.gov Complaint

Howard Scher Attorney Buchanan Ingersoll & Rooney PC howard.scher@bipc.com Respondent

Kenneth Racowski Attorney Buchanan Ingersoll & Rooney PC kenneth.racowski@bipc.com Respondent

Carrie Amezcua Attorney Buchanan Ingersoll & Rooney PC carrie.amezcua@bipc.com Respondent

John McDonald Locke Lord LLP jpmcdonald@lockelord.com Respondent

Lauren Fincher Locke Lord LLP lfincher@lockelord.com Respondent

Colin Kass Proskauer Rose LLP ckass@proskauer.com Respondent

Adrian Fontecilla Associate Proskauer Rose LLP afontecilla@proskauer.com Respondent

Timothy Muris Sidley Austin LLP tmuris@sidley.com Respondent

Geoffrey D. Oliver Jones Day gdoliver@jonesday.com Respondent Craig A. Waldman Partner Jones Day cwaldman@jonesday.com Respondent

Benjamin M. Craven Jones Day bcraven@jonesday.com Respondent

Ausra O. Deluard Jones Day adeluard@jonesday.com Respondent

Joseph Ostoyich Partner Baker Botts L.L.P. joseph.ostoyich@bakerbotts.com Respondent

William Lavery Senior Associate Baker Botts L.L.P. william.lavery@bakerbotts.com Respondent

Andrew George Baker Botts L.L.P. andrew.george@bakerbotts.com Respondent

Jana Seidl Baker Botts L.L.P. jana.seidl@bakerbotts.com Respondent

Kristen Lloyd Associate Baker Botts L.L.P. Kristen.Lloyd@bakerbotts.com Respondent

James Long Attorney Briggs and Morgan, P.A. jlong@briggs.com Respondent

Jay Schlosser Attorney Briggs and Morgan, P.A. jschlosser@briggs.com Respondent

Scott Flaherty Attorney Briggs and Morgan, P.A. sflaherty@briggs.com Respondent Ruvin Jayasuriya Attorney Briggs and Morgan, P.A. rjayasuriya@briggs.com Respondent

William Fitzsimmons Attorney Briggs and Morgan, P.A. wfitzsimmons@briggs.com Respondent

Hyun Yoon Buchanan Ingersoll & Rooney PC eric.yoon@bipc.com Respondent

David Owyang Attorney Federal Trade Commission dowyang@ftc.gov Complaint

Karen Goff Attorney Federal Trade Commission kgoff@ftc.gov Complaint

Emily Burton Attorney Federal Trade Commission eburton@ftc.gov Complaint

Jessica Drake Attorney Federal Trade Commission jdrake@ftc.gov Complaint

Ashley Masters Attorney Federal Trade Commission amasters@ftc.gov Complaint

Terry Thomas Attorney Federal Trade Commission tthomas1@ftc.gov Complaint

Danica Nobel Attorney Federal Trade Commission dnoble@ftc.gov Complaint

Mary Casale

Attorney Federal Trade Commission mcasale@ftc.gov Complaint

Thomas Manning Buchanan Ingersoll & Rooney PC Thomas.Manning@bipc.com Respondent

Sarah Lancaster Locke Lord LLP slancaster@lockelord.com Respondent

Owen Masters Associate Proskauer Rose LLP omasters@proskauer.com Respondent

Stephen Chuk Proskauer Rose LLP schuk@proskauer.com Respondent

Rucha Desai Associate Proskauer Rose LLP rdesai@proskauer.com Respondent

Jessica Moy Federal Trade Commission jmoy@ftc.gov Complaint

Thomas Dilickrath Federal Trade Commission tdilickrath@ftc.gov Complaint

Caroline L. Jones Associate Baker Botts L.L.P. caroline.jones@bakerbotts.com Respondent

David Munkittrick Proskauer Rose LLP dmunkittrick@proskauer.com Respondent

David Heck Proskauer Rose LLP dheck@proskauer.com Respondent

Thomas Dillickrath Deputy Chief Trial Counsel Federal Trade Commission tdillickrath@ftc.gov Complaint

Josh Goodman Attorney Federal Trade Commission jgoodman@ftc.gov Complaint

Nair Diana Chang Federal Trade Commission nchang@ftc.gov Complaint

Adam Saltzman Buchanan Ingersoll & Rooney PC adam.saltzman@bipc.com Respondent

I hereby certify that on October 10, 2018, I served via other means, as provided in 4.4(b) of the foregoing Respondent Henry Schein, Inc.'s Motion to Admit RX2933, upon:

Katherine Cser Attorney Kerr-Russell kcser@kerr-russell.com Respondent

Daniel Schulte Attorney Kerr-Russell dschulte@kerr-russell.com Respondent

> Owen Masters Attorney