

Dear Manufacturers,

I am writing on behalf of East Orange General Hospital, Inc. (EOGH) (340B ID#: DSH310083) to inform manufacturers that EOGH recently underwent an audit by the Health Resources and Services Administration (HRSA) of EOGH's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, EOGH qualified for the 340B Program as a non-profit, community based hospital located at 300 Central Ave., East Orange, New Jersey, 07018 and has participated in the 340B Program since October 1, 2004.

Through the audit process, EOGH was found to have non-compliance within their 340B Program and responsible for repayment as a result of the following finding(s):

- *Finding 1:* EOGH obtained covered outpatient drugs through a GPO.
- *Finding 2:* EOGH did not have adequate controls to prevent duplicate discounts which may have resulted in duplicate discounts as prohibited by 42 USC 256b(a)(5)(A).
- *Finding 3:* EOGH dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256b(a)(5)(B).
- *Finding 4:* 340B drugs were not properly accumulated. EOGH did not have adequate controls in place to ensure proper accumulation and prevention of diversion of 340B drugs, as prohibited by 42 USC 256b(a)(5)(B).

EOGH has identified all affected manufacturers and has contacted each to notify them of these violations to begin a dialogue on a method for repayment to affected manufacturers. If manufacturers have not received notification from EOGH and believe repayment may be owed for the violations described in this letter, or if you have any questions or comments regarding the violations described in this letter please contact Nicholas J. Lanza, Senior Vice President and CFO, 973-414-3405, East Orange General Hospital, 300 Central Ave, East Orange, New Jersey 07019.