



December 8, 2015

Dear Manufacturers,

I am writing on behalf of Outer Cape Health Services, Inc. ("OCHS"), 340B ID CH011190, to inform manufacturers that OCHS recently underwent an audit by the Health Resources and Services Administration (HRSA) of OCHS' compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, OCHS qualified for the 340B Program in its Provincetown, Massachusetts health center, serving the eight outermost towns of Cape Cod (Barnstable County), Massachusetts, and has participated in the 340B Program since April 1, 2002.

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

- Finding 1: OCHS dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256b(a)(5)(B).
- Finding 2: OCHS was billing Medicaid contrary to information contained in the HRSA Medicaid Exclusion File. This action may have resulted in duplicate discounts as prohibited by 42 USC 256b(a)(5)(A).

OCHS 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 OCHS 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 Patricia Nadle, Chief Operating Officer, Outer Cape Health Services, P.O. Box 1413, Wellfleet, MA 02667, 508-905-2800, [pnadle@outercape.org](mailto:pnadle@outercape.org).

Sincerely,

Outer Cape Health Services, Inc.