

Logan Regional Hospital
1400 North 500 East
Logan, UT 84341

Dear Manufacturers,

I am writing on behalf of Logan Regional Hospital (LRH, 340B ID DSH460015) to inform Manufacturers that LRH underwent an audit by the Health Resources and Services Administration (HRSA) of LRH's compliance with the 340B Drug Pricing Program (340B Program) requirements.

As background, Logan Regional Hospital qualified for the 340B Program as a Disproportionate Share Hospital located in Logan, Utah and has participated in the 340B program since July 1, 2011.

Through the audit process, LRH was found to have non-compliance within our 340B Program and responsible for repayment as a result of the following finding:

Finding #1: Logan dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256b(a)(5)(B).

This finding was associated with the processing of prescriptions in LRH's contract pharmacies. This situation was discovered early in the audit process and LRH self-reported the issue. Consequently LRH ceased its contract pharmacy operations in November of 2013. In January of 2014 LRH sent a letter to affected manufacturers disclosing the issue and offering to arrange repayment. A second letter was sent in March of 2014 to manufacturers that had not responded.

If manufacturers have not received notification from LRH and believe repayment may be owed for the violation described in this letter, or if you have any questions or comments regarding the information contained in this letter, please contact Alan Robinson, Chief Financial Officer, Logan Regional Hospital 1400 North 500 East, Logan, Utah 84341.

LRH is committed to compliance to the 340B Program and is working diligently to be and remain compliant. Participation in the 340B program is important to fulfillment of LRH's mission to provide extraordinary care to our community and those in need.

Sincerely,

Alan Robinson
Finance Director/Compliance Administrator