

Dear Manufacturers,

I am writing on behalf of CHRISTUS Santa Rosa Health System (Santa Rosa; 340B ID: DSH450237) to inform manufacturers that Santa Rosa recently underwent an audit by the Health Resources and Services Administration (HRSA) of Santa Rosa's compliance with 340B Drug Pricing Program ("340B Program") requirements.

As background, Santa Rosa qualified for the 340B Program as a disproportionate share hospital located at 2827 Babcock Road, San Antonio, TX 78229, and has participated in the 340B Program since July 1, 2006.

Through the audit process, Santa Rosa was found to have non-compliance within its 340B program, and is responsible for repayment as a result of the following finding:

**Santa Rosa dispensed 340B drugs to ineligible individuals, as prohibited by section 340B(a)(5)(B) of the PHSA**

Covered entities are prohibited by section 340B(a)(5)(B) of the PHSA from reselling or otherwise transferring a 340B drug to a person who is not a patient of the covered entity. During the course of the audit, HRSA identified potential instances of retail prescriptions being filled at four of Santa Rosa's contract pharmacies for patients who did not meet the patient definition guidelines.

Santa Rosa has identified all affected manufacturers and has contacted each to notify them of these violations to begin a dialogue regarding a method for repayment. If manufacturers have not received notification from Santa Rosa 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:

Ms. Linda Kirks  
Regional Vice President and Chief Financial Officer  
CHRISTUS Santa Rosa Health System  
2827 Babcock Road  
San Antonio, TX 78229  
(210) 704-2624

Sincerely,

Linda Kirks  
Regional Vice President and Chief Financial Officer  
340B Responsible Authority for CHRISTUS Santa Rosa Health System # DSH450237