



August 25, 2016

Dear Manufacturers,

Miami Valley Hospital (DSH#360051) recently underwent a routine audit by the Health Resources and Services Administration (HRSA) of MVH's compliance with the 340B Drug Pricing Program requirements.

As background, Miami Valley Hospital qualified for the 340B Program as a Disproportionate Share Hospital in Dayton, Ohio, and has participated in the 340B Program since April 2005.

Through the audit process, Miami Valley Hospital was found to have possible non-compliance within the 340B Program and may be responsible for repayment as a result of the following finding(s):

- **340B drugs were not properly accumulated. MVH did not have adequate controls in place to ensure proper accumulations and prevention of diversion of 340B drugs, as prohibited by 42 USC 256b(a)(5)(B) of the PHSA.**
- **MVH dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256b(a)(5)(B) of the PHSA.**
- **MVH listed incorrect or incomplete billing information on the 340B Medicaid Exclusion File. This may have resulted in duplicate discounts as prohibited by section 340B(a)(5)(A) of the PHSA.**

MVH 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 Miami Valley Hospital 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 Thomas Duncan, Senior VP and CFO at [TDuncan@PremierHealth.com](mailto:TDuncan@PremierHealth.com) and Melany Aylor, 340B Coordinator at [mcaylor@premierhealth.com](mailto:mcaylor@premierhealth.com).

Respectfully,

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