

January 30, 2015

Dear Manufacturers:

Please be informed that Muhlenberg Community Hospital (MCH), 340B Program identification number DSH 180004, recently underwent an audit by the Health Resources and Services Administration (HRSA) of MCH's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, MCH qualified for the 340B Program as a Disproportionate Share Hospital (DSH) and has participated in the 340B Program since October 1, 2006.

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

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

Finding 2: 340B drugs were not properly accumulated. MCH 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).

MCH 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 MCH 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 me: Renee Orange, CFO, by telephone to my office at (270) 338-8277 or by mail at PO Box 387, Greenville, KY 42345.

Sincerely,

C. Renee Orange, CPA, CHFP
Chief Financial Officer

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