



March 25, 2015

Dear Manufacturers,

I am writing on behalf of Athens Regional Medical Center (ARMC 340B ID# DSH110074) to inform manufacturers that ARMC recently underwent an audit by the Health Resources and Services Administration (HRSA) of ARMC's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, ARMC qualified for the 340B Program as a Disproportionate Share Hospital (DSH) located at 1199 Prince Avenue, Athens, Georgia 30606 and has participated in the 340B Program since September 29, 2005.

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

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

Finding #2: 340B drugs were not properly accumulated. ARMC did not have adequate controls in place to ensure proper accumulation and prevention of diversion of 340B drugs, as prohibited by 42 USC 256(a)(5)(B).

Finding #3: ARMC did not have adequate controls to prevent duplicate discounts which may have resulted in duplicate discounts as prohibited by 42 USC 256(a)(5)(A).

ARMC is in the process of identifying all affected manufacturers and will contact each to notify them of these violations to begin a dialogue on a method for repayment to affected manufacturers. If manufacturers 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 Diane Todd, Director, Risk Management & Corporate Compliance at 706-475-3496 or dtodd@armc.org.

Sincerely,

A handwritten signature in cursive script that reads "Charles A. Peck, MD FACP".

Charles Peck, President & CEO
Athens Regional Health System