

Dear Manufacturers,

I am writing on behalf of Rush University Medical Center (RUMC) (340B ID: DSH140119) to inform manufacturers that RUMC recently underwent a routine 340B Drug Pricing Program (340B Program) audit conducted by the Health Resources and Services Administration (HRSA).

As background, RUMC qualifies for the 340B Program as a Disproportionate Share Hospital (“DSH”) in Illinois and has participated in the 340B Program since December 1, 2005.

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

- (1) RUMC dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256(a)(5)(B). This finding was limited to certain instances of dispensing to individuals in the RUMC inpatient hospice unit.
- (2) RUMC was billing Medicaid for 340B drugs at its contract pharmacies and did not notify HRSA of the arrangement.

RUMC has identified all affected manufacturers and has contacted each to notify them of violations affecting them and corrective actions taken by RUMC to address the violations. If manufacturers have not received notification from RUMC 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 Nora Flint, Interim Director of Pharmacy, at the following address:

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