

August 28, 2015

Dear Manufacturers,

I am writing on behalf of Queens Hospital, 340B ID DSH330231, to inform manufacturers that Queens Hospital Center recently underwent an audit by the Health Resources and Services Administration (HRSA) of Queens Hospital Center's compliance with 340B Drug Pricing Program (340B) requirements.

As background, Queens Hospital Center qualified for the 340B Program as a Disproportionate Share Hospital at 82-68 164th Street, Jamaica, New York 11432, and has participated in the 340B Program since 1992.

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

- 1) Queens Hospital Center obtained covered outpatient drugs through a GPO

Mixed-use 340B drugs were ordered on the GPO Controlled Substance ordering System (CSOS) account until January 2014.

- 2) Queens Hospital Center dispensed 340B drugs to ineligible individuals, as prohibited by 42 USC 256b(a)(5)(B).

Queens Hospital Center's contract pharmacies incorrectly deemed two prescriptions 340B-eligible.

Queens Hospital Center reversed the 2 prescriptions from contract pharmacies that should not have been eligible.

Queens Hospital Center 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 Queens Hospital Center and believe repayment may be owed for the violation described in this letter, or if you have any questions or comments regarding the violation described in this letter, within the next 90 days from the date of this letter, please contact Mr. Paul A. Albertson, Sr. Assistant Vice President, Supply Chain Services, New York City Health and Hospitals Corporation, 160 Water Street, 13th Floor, New York, NY 10038, telephone number 212-748-2256, email: paul.albertson@nychhc.org

Sincerely yours,

Antonio D. Martin