

June 7, 2016

Mr. Thomas Pettin
5600 Fishers Lane
Mail Stop 8W05A
Rockville, MD 20857

Dear Manufacturers:

I am writing on behalf of Aurora Sheboygan Memorial Medical Center (DSH520035) to inform manufacturers that Aurora Sheboygan Memorial Medical Center recently underwent an audit by the Health Resources and Services Administration (HRSA) of its compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, Aurora Sheboygan Memorial Medical Center qualified for the 340B Program as a Disproportionate Share Hospital in Sheboygan, Wisconsin and has participated in the 340B Program since July 1, 2011.

Through the audit process, Aurora Sheboygan Memorial Medical Center was found to have non-compliance within its 340B Program, and is now responsible for repayment as a result of the following finding(s):

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

Aurora Sheboygan Memorial Medical 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 Aurora Sheboygan Memorial Medical Center 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 Angela De Ianni, Pharmacy Supply Chain Director, 414-382-1854, angela.deianni@aurora.org.

Sincerely,



Gail Hanson
Chief Financial Officer

CC: Angela De Ianni