



March 22, 2016

Dear Manufacturers,

I am writing on behalf of Childress Regional Medical Center (DSH450369) to inform manufacturers that Childress Regional Medical Center recently underwent an audit by the Health Resources and Services Administration (HRSA) of Childress Regional Medical Center's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, Childress Regional Medical Center qualified for the 340B Program as Disproportionate Share Hospital in Childress, Texas and has participated in the 340B Program since September of 2008.

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

Finding 1: CRMC dispensed 340B drugs to ineligible individuals, as prohibited by section 340B(a)(5)(B) of the PHSA.

Childress Regional 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 Childress Regional Medical Center and believe repayment may be owed for the violations described in this letter or require additional information, I can be reached directly at 940-839-5968, or via email at nbarker@childresshospital.com, or at Childress Regional Medical Center, 901 Highway 83 North, Childress, TX 79201.

Sincerely,

Nick P. Barker
Director of Pharmacy
Childress Regional Medical Center

Childress Regional Medical Center

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