



Date: October 6, 2015

FROM:

Bonnie Jenkins, CFO
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I am writing on behalf of Mercy General Hospital (340B ID DSH050017) to inform manufacturers that Mercy General Hospital recently underwent an audit by Health Resources and Services Administration (HRSA) of Mercy General Hospital's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, Mercy General Hospital qualified for the 340B Program as a DSH hospital in Sacramento, California and has participated in the 340B program since April 1, 2005.

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

Mercy General Hospital obtained 340B covered outpatient drugs through a group purchasing organization (GPO) for narcotics therefore was not in compliance with the GPO prohibition requirement of the 340B Program.

Mercy General Hospital has identified all affected manufacturers and has contacted each by letter to notify them of these violations to begin a dialogue on a method for repayment. If manufacturers have not received notification from Mercy General Hospital 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:

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If we do not hear from manufacturers within 45 days of the publication of this letter, we will consider this issue closed.