

February 25, 2016

Dear Manufacturers,

I am writing on behalf of SSM DePaul Health Center (DSH260104) to inform manufacturers that SSM DePaul Health Center recently underwent an audit by the Health Resources and Services Administration (HRSA) of DePaul's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, DePaul Health Center qualified for the 340B Program as a Disproportionate Share Hospital (DSH) located at 12303 DePaul Drive, Bridgeton, MO 63044 and has participated in the 340B program since October 1, 2006.

Through the audit process, DePaul Health 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: DePaul dispensed 340B drugs to ineligible individuals, as prohibited by section 340B(a)(5)(B) of the PHSA.

Finding #2: 340B drugs were not properly accumulated. DePaul did not have adequate controls in place to ensure proper accumulations and prevention of diversion of 340B drugs, as prohibited by section 340B(a)(5)(B) of the PHSA.

DePaul has identified all affected manufacturers and has contacted each to notify them of these violations to begin dialogue on a method for repayment to affected manufacturers. If manufacturers have not received notification from DePaul 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 Greta Geringer, Finance Director, 340B at 314-989-3518 or Greta_Geringer@ssmhc.com.

Sincerely,



Karen Rewerts, System Vice President, Finance
SSM Health (Illinois and Missouri)