

March 17, 2016

Dear Manufacturers,

I am writing on behalf of St. Mary's Medical Center (DSH 050457) to inform manufacturers that St. Mary's Medical Center recently underwent an audit by the Health Resources and Services Administration (HRSA) of St. Mary's Medical Center's compliance with 340B Drug Pricing Program (340B Program) requirements.

As background, St. Mary's Medical Center qualified for the 340B Program as a Disproportionate Share Hospital in San Francisco, CA and has participated in the 340B Program since January 1, 2007.

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

- 340B drugs were not properly accumulated. SMMC did not have adequate controls in place to ensure proper accumulation and prevention of diversion of 340B drugs, as prohibited by section 340B(a)(5)(B) of the PHSA.
- SMMC listed incorrect or incomplete information on the 340B Medicaid Exclusion File.

St. Mary's 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 St. Mary's 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 Minh Thu Nguyen, Director of Pharmacy, at (415) 750-4988 or 450 Stanyan St. San Francisco, CA 94117.

Sincerely,

**Minh Thu Nguyen, PharmD, BCPS**  
Director of Pharmacy

**St. Mary's Medical Center**  
**A Dignity Health Member**  
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