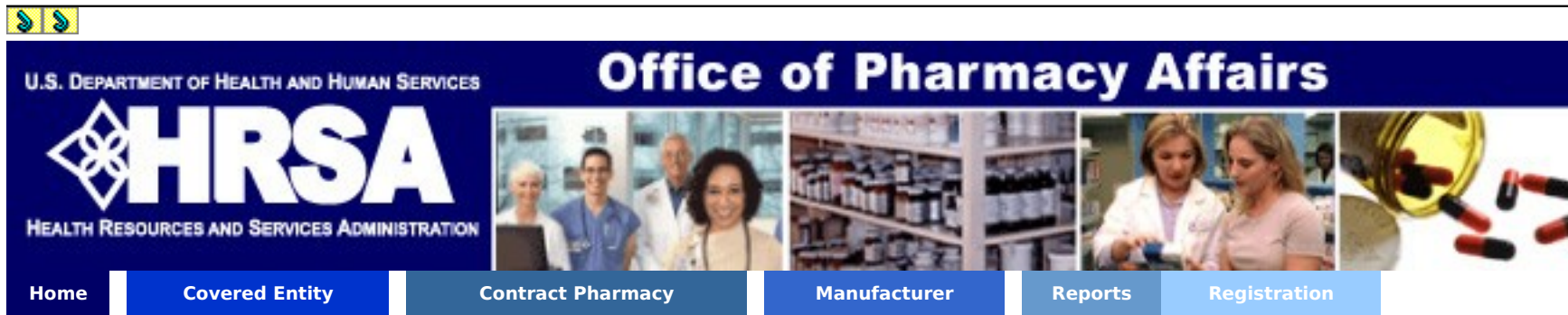


This is an example of a screenshot of the 340B public database and the information that hospitals would need to certify during the electronic recertification process.



Your feedback is very important to us. Please [click here](#) to tell us what you think!

Need Help 

8/14/2009 12:54:00 PM

Covered Entity

Covered Entity Information

Grant/Provider Number: 090006
Entity Type: Disproportionate Share Hospital
340B ID: DSH090006
Entity Name: PROVIDENCE HOSPITAL
Sub-Division Name:
Address: 1150 VARNUM STREET, NE
WASHINGTON, District of Columbia 20017
Comments: 5/1/08-REVISED MEDICAID # (WAS 0293340)

Contract Pharmacies

Link to Pharmacy	Name	Address	Address (con't)	City	State	Zip	Begin Date	Termination Date
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Link	WELLINGTON APOTHECARY	1160 VARNUM STREET, NE		WASHINGTON	DC	2001 7	03/14/2008		
340B Program Information					Covered Entity Authorizing Official				
<p>Rural: No Participating: YES Participating Start Date: 7/1/2003 Termination Date: Terminated(Previous) 340B ID: DSH20017 Link to Terminated Entity Medicaid Provider Number/NPI: 029833400 - (DC) Alternative Methods: NO</p>					<p>Signed: Title: PRESIDENT/CEO Date Signed: Phone: 202-</p>				
					Covered Entity Contact Information				
					<p>Name: Title: SENIOR VP/FINANCE Phone: 202-</p>				
Edit User: NSingh Edit Date: 5/1/2008									

Other Related 340B Entities									
<u>Detail</u>	<u>340B ID</u>	<u>Entity Name</u>	<u>Sub-Division Name</u>	<u>Address</u>	<u>Address (con't)</u>	<u>City</u>	<u>State</u>	<u>Start Date</u>	<u>Term Date</u>
Detail	DSH20017	PROVIDENCE HOSPITAL		1150 VARNUM STREET, NE		WASHINGTON	DC	07/01/2003	07/01/2008