Jakafi®
ruxolitinib (tablets)
5mg • 10mg • 15mg • 20mg • 25mg

WHAT TO KNOW ABOUT JAKAFI

A guide for **patients** and their **caregivers**

Jakafi® (ruxolitinib) is used to treat adults and children 12 years of age and older with chronic graft-versus-host disease (GVHD) who have taken one or two types of treatments and they did not work well enough.

Additional tools, information, and resources are available at cGVHDinfo.com.

IMPORTANT SAFETY INFORMATION

Jakafi can cause serious side effects, including:
Low blood counts: Jakafi® (ruxolitinib) may cause low platelet, red blood cell, and white blood cell counts. If you develop bleeding, stop taking Jakafi and call your healthcare provider. Your healthcare provider will do a blood test to check your blood counts before you start Jakafi and regularly during your treatment. Your healthcare provider may change your dose of Jakafi or stop your treatment based on the results of your blood tests. Tell your healthcare provider right away if you develop or have worsening symptoms such as unusual bleeding, bruising, tiredness, shortness of breath, or a fever.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

Jakafi® ruxolitinib (tablets)
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About Jakafi and chronic graft-versus-host disease

after one or two types of treatments did not work well enough

Your treatment journey depends on your individual circumstances and the decisions you make with your Healthcare Professionals. Together, you may discuss Jakafi® (ruxolitinib)—an *FDA-approved prescription medicine* used to treat adults and children 12 years of age and older with chronic graft-versus-host disease (GVHD) who have taken one or two types of treatments and they did not work well enough.

IMPORTANT SAFETY INFORMATION (continued)

Infection: You may be at risk for developing a serious infection during treatment with Jakafi. Tell your healthcare provider if you develop any of the following symptoms of infection: chills, nausea, vomiting, aches, weakness, fever, painful skin rash or blisters.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

What is chronic graft-versus-host disease?

Graft-versus-host disease (GVHD) is a serious complication that may affect people who have had a stem cell transplant using cells from a donor. This type of procedure is called an ***allogeneic (AL-oh-geh-NAY-ik) stem cell transplant***. During an allogeneic stem cell transplant, a patient's cells are replaced with donor cells. **(Figure A)**

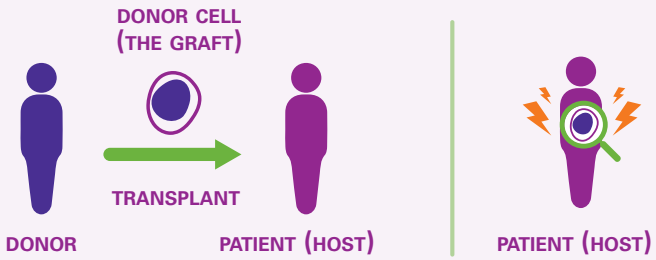


FIGURE A

FIGURE B

GVHD occurs when donor cells (called the ***graft***) attack the organs and tissues of the patient who received them (or the ***host***). That's why the condition is known as graft-versus-host disease. **(Figure B)**

There are two main types of GVHD—acute and chronic. **Acute GVHD** usually develops within the first 3 months after transplant. Symptoms are typically limited to the skin, liver, and digestive system.

IMPORTANT SAFETY INFORMATION (continued)
Cancer: Some people have had certain types of non-melanoma skin cancers during treatment with Jakafi. Your healthcare provider will regularly check your skin during your treatment with Jakafi. Tell your healthcare provider if you develop any new or changing skin lesions during treatment with Jakafi.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

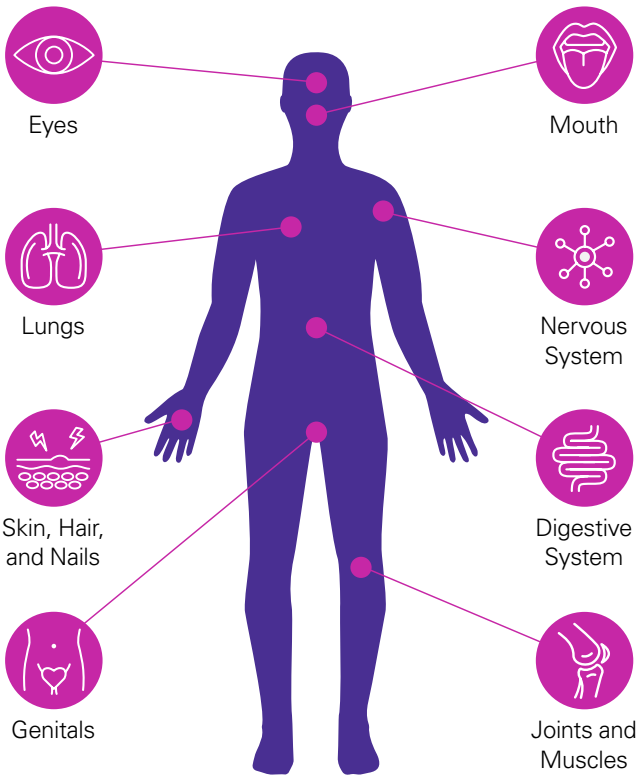
Many people who develop chronic GVHD have had acute GVHD in the past.

Chronic GVHD tends to develop more slowly than acute GVHD. In most cases, symptoms appear sometime in the first year after transplant. Chronic GVHD can also affect many more organs and tissues than acute GVHD, so it is important to keep watching for new signs and symptoms.

Some of the effects of chronic GVHD include tissue thickening and scarring, known as fibrosis. These symptoms are similar to ones caused by certain autoimmune diseases. (Autoimmune diseases happen when the body's immune system attacks healthy organs by mistake.) Other symptoms of chronic GVHD—such as dry eyes, muscle pain, and breathing trouble—are also common with other conditions.

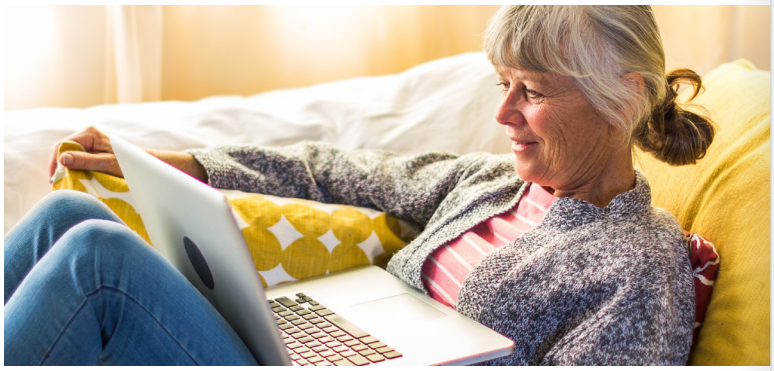
What parts of the body can be affected by chronic GVHD?

Chronic GVHD can affect one or more of these areas of the body.



How is chronic GVHD diagnosed?

Because chronic GVHD symptoms can be confused with other health conditions, your Healthcare Professional may do a thorough physical exam as well as various tests to diagnose it. This helps them make sure your symptoms are caused by chronic GVHD and not something else.



Contact your Transplant Team right away if you notice any of these signs or symptoms or if your existing ones worsen. Early diagnosis and proper treatment are important!

Transplant Center #: _____

Helpful hint: Caregivers can help monitor for any new or changing symptoms of GVHD—especially in areas like the back or the eyes, where patients may not notice their symptoms right away. Family, friends, and other caregivers are essential for helping patients during transplant recovery and for supporting each other.

IMPORTANT SAFETY INFORMATION (continued)

Increases in cholesterol: You may have changes in your blood cholesterol levels during treatment with Jakafi. Your healthcare provider will do blood tests to check your cholesterol levels about every 8 to 12 weeks after you start taking Jakafi, and as needed.

Signs and symptoms of chronic GVHD

Skin, Hair, and Nails

Skin texture changes (thickening) | Nail changes | Rash | Unusual hair loss or thinning | Itchy skin

Eyes

Dry eyes | Irritation that won't go away | Blurred vision | Teary eyes

Mouth

Painless white lines on tongue or inner cheeks | Sores or irritation | Trouble opening your mouth | Sensitivity to spice | Dry mouth and lips

Digestive System

Nausea or vomiting | Diarrhea | Belly pain or cramping | Liver symptoms, such as yellowing of the eyes or skin

Joints and Muscles

Arthritis-like symptoms (pain and stiffness) | Muscle aches or pain, cramps, or weakness

Lungs

Cough that doesn't go away | Shortness of breath

Genitals

Irritation or dryness | Rash | Painful intercourse

Nervous System

Weakness, tingling, numbness in legs or feet

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

IMPORTANT SAFETY INFORMATION (continued)

Increased risk of major cardiovascular events such as heart attack, stroke or death in people who have cardiovascular risk factors and who are current or past smokers while using another JAK inhibitor to treat rheumatoid arthritis: Get emergency help right away if you have any symptoms of a heart attack or stroke while taking Jakafi, including: discomfort in the center of your chest that lasts for more than a few minutes, or that goes away and comes back, severe tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw, pain or discomfort in your arms, back, neck, jaw, or stomach, shortness of breath with or without chest discomfort, breaking out in a cold sweat, nausea or vomiting, feeling lightheaded, weakness in one part or on one side of your body, slurred speech

When steroids or other treatments don't work well enough

For chronic GVHD, often patients may need to try more than one treatment. Steroids (also known as corticosteroids) are the standard treatment that Healthcare Professionals prescribe for patients with newly diagnosed chronic graft-versus-host disease (GVHD).

Although steroid treatment is successful for some patients, others do not respond initially or do not fully respond. Other medicines may also be used to treat chronic GVHD. Not all patients respond to the initial treatments and may need other options.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

Moving your treatment journey forward

What is Jakafi® (ruxolitinib)?

Jakafi (JAK-ah-fye) is a prescription medicine available as a pill. It is used to treat adults and children 12 years of age and older with chronic graft-versus-host disease (GVHD) who have taken one or two types of treatments and they did not work well enough.

How does Jakafi work?

Proteins known as ***Janus kinases***, or JAKs, are involved in multiple steps leading to inflammation and related issues in chronic GVHD. Jakafi helps to reduce the activity of JAKs.

Jakafi may also help to decrease the level of proteins called cytokines. Cytokines contribute to inflammation and the attack on the host's organs by the cells transplanted from the donor.

What is a clinical trial?

In order to better understand how medicines work and what side effects they may cause, researchers perform clinical trials in which patients with a disease often receive a medicine and researchers observe the results.

Was there a clinical trial with Jakafi in chronic GVHD?

Yes, Jakafi was studied in a clinical trial, called the REACH3 study, in patients with chronic GVHD who had taken one or two other treatments and they did not work well enough.

IMPORTANT SAFETY INFORMATION (continued)

Increased risk of blood clots: Blood clots in the veins of your legs (deep vein thrombosis, DVT) or lungs (pulmonary embolism, PE) have happened in people taking another JAK inhibitor for rheumatoid arthritis and may be life-threatening. Tell your healthcare provider right away if you have any signs and symptoms of blood clots during treatment with Jakafi, including: swelling, pain, or tenderness in one or both legs, sudden, unexplained chest or upper back pain, shortness of breath or difficulty breathing

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

Who was included in the REACH3 study of Jakafi® (ruxolitinib) for chronic GVHD?

A total of **329 patients** with chronic graft-versus-host disease (GVHD) who were not responding well to steroids, with or without other medicines that suppress the immune system, were enrolled in this clinical trial.

Half (165 patients) were treated with Jakafi; the other half (164 patients) were treated with one or more of a limited group of other treatments that are commonly used for chronic GVHD.

About 55% (180 of 329 patients) in this study had previous acute GVHD.

What else should I know about these patients?

Patients in the two treatment groups were similar in terms of disease severity and age.

- In the Jakafi group: **48%** (79 of 165) of patients had moderate and **52%** (86 of 165) had severe chronic GVHD
- In the other treatments group: **52%** (85 of 164) had moderate and **48%** (79 of 164) had severe chronic GVHD
- Overall, patients ranged in age from 12 to 76 years; **average age of 49 years** in the Jakafi group **and 50 years** in the other treatments group

Your results with Jakafi may vary. **Talk to your Transplant Team** about any questions you have.

IMPORTANT SAFETY INFORMATION (continued)

Possible increased risk of new (secondary) cancers: People who take another JAK inhibitor for rheumatoid arthritis have an increased risk of new (secondary) cancers, including lymphoma and other cancers. People who smoke or who smoked in the past have an added risk of new cancers.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

How was response to treatment measured and defined?

The main goal of this study was to assess each patient for their:

- **Overall response to treatment:** which meant either a:
  - Complete resolution of all original signs and symptoms of chronic GVHD (complete response)

  or
  - At least some improvement in at least one affected area without worsening signs or symptoms in other areas (partial response)

Researchers also assessed for:

- **Symptom improvement:** which meant at least a 7-point reduction in patient-reported symptoms at any point through the 24 weeks compared with the start of the study based on a standardized rating scale of 0 to 100 (no symptoms to worst symptoms)

Researchers in the REACH3 study looked at how each treatment group experienced symptom improvement related to skin, eye, mouth, lung function, nutrition, energy, and psychological status.

IMPORTANT SAFETY INFORMATION (continued)

The most common side effects of Jakafi include: for certain types of myelofibrosis (MF) and polycythemia vera (PV) – low platelet or red blood cell counts, bruising, dizziness, headache, and diarrhea; for acute GVHD – low platelet counts, low red or white blood cell counts, infections, and swelling; and for chronic GVHD – low red blood cell or platelet counts and infections including viral infections.

These are not all the possible side effects of Jakafi. Ask your pharmacist or healthcare provider for more information. Call your doctor for medical advice about side effects.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

Possible benefits of Jakafi® (ruxolitinib) when studied against other therapies for chronic GVHD

More patients treated with Jakafi experienced a response compared with patients who were treated with other therapies

At 24 weeks:

(82 of 165 patients) **treated with Jakafi** had either a complete or partial response

(42 of 164 patients) treated with other study therapies had either a complete or partial response

At any point through the 24 weeks:

(116 of 165 patients) **treated with Jakafi** had either a complete or partial response

(94 of 164 patients) treated with other study therapies had either a complete or partial response

40% (66 of 165) of patients treated with Jakafi reported symptom reduction at any point through the 24 weeks.

IMPORTANT SAFETY INFORMATION

What important safety information do I need to know?

Jakafi can cause serious side effects, including:

Low blood counts: Jakafi® (ruxolitinib) may cause low platelet, red blood cell, and white blood cell counts. If you develop bleeding, stop taking Jakafi and call your healthcare provider. Your healthcare provider will do a blood test to check your blood counts before you start Jakafi and regularly during your treatment. Your healthcare provider may change your dose of Jakafi or stop your treatment based on the results of your blood tests. Tell your healthcare provider right away if you develop or have worsening symptoms such as unusual bleeding, bruising, tiredness, shortness of breath, or a fever.

Infection: You may be at risk for developing a serious infection during treatment with Jakafi. Tell your healthcare provider if you develop any of the following symptoms of infection: chills, nausea, vomiting, aches, weakness, fever, painful skin rash or blisters.

Cancer: Some people have had certain types of non-melanoma skin cancers during treatment with Jakafi. Your healthcare provider will regularly check your skin during your treatment with Jakafi. Tell your healthcare provider if you develop any new or changing skin lesions during treatment with Jakafi.

Increases in cholesterol: You may have changes in your blood cholesterol levels during treatment with Jakafi. Your healthcare provider will do blood tests to check your cholesterol levels about every 8 to 12 weeks after you start taking Jakafi, and as needed.

Increased risk of major cardiovascular events such as heart attack, stroke or death in people who have cardiovascular risk factors and who are current or past smokers while using another JAK inhibitor to treat rheumatoid arthritis: Get emergency help right away if you have any symptoms of a heart attack or stroke while taking Jakafi, including: discomfort in the center of your chest that lasts for more than a few minutes, or that goes away and comes back, severe tightness, pain, pressure, or heaviness in your chest, throat, neck, or jaw, pain or discomfort in your arms, back, neck, jaw, or stomach, shortness of breath with or without chest discomfort, breaking out in a cold sweat, nausea or vomiting, feeling lightheaded, weakness in one part or on one side of your body, slurred speech

Increased risk of blood clots: Blood clots in the veins of your legs (deep vein thrombosis, DVT) or lungs (pulmonary embolism, PE) have happened in people taking another JAK inhibitor for rheumatoid arthritis and may be life-threatening. Tell your healthcare provider right away if you have any signs and symptoms of blood clots during treatment with Jakafi, including: swelling, pain, or tenderness in one or both legs, sudden, unexplained chest or upper back pain, shortness of breath or difficulty breathing

Possible increased risk of new (secondary) cancers: People who take another JAK inhibitor for rheumatoid arthritis have an increased risk of new (secondary) cancers, including lymphoma and other cancers. People who smoke or who smoked in the past have an added risk of new cancers.

The most common side effects of Jakafi include: for certain types of myelofibrosis (MF) and polycythemia vera (PV) – low platelet or red blood cell counts, bruising, dizziness, headache, and diarrhea; for acute GVHD – low platelet counts, low red or white blood cell counts, infections, and swelling; and for chronic GVHD – low red blood cell or platelet counts and infections including viral infections.

These are not all the possible side effects of Jakafi. Ask your pharmacist or healthcare provider for more information. Call your doctor for medical advice about side effects.

Before taking Jakafi, tell your healthcare provider about: all the medications, vitamins, and herbal supplements you are taking and all your medical conditions, including if you have an infection, have or had low white or red blood cell counts, have or had tuberculosis (TB) or have been in close contact with someone who has TB, had shingles (herpes zoster), have or had hepatitis B, have or had liver or kidney problems, are on dialysis, have high cholesterol or triglycerides, had cancer, are a current or past smoker, had a blood clot, heart attack, other heart problems or stroke, or have any other medical condition. Take Jakafi exactly as your healthcare provider tells you. Do not change your dose or stop taking Jakafi without first talking to your healthcare provider.

Women should not take Jakafi while pregnant or planning to become pregnant. Do not breastfeed during treatment with Jakafi and for 2 weeks after the final dose.

Please *click here* for Full Prescribing Information, which includes a more complete discussion of the risks associated with Jakafi.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit ***www.fda.gov/medwatch***, or call **1-800-FDA-1088**.

You may also report side effects to Incyte Medical Information at **1-855-463-3463.**

What should you tell your Transplant Team before taking Jakafi® (ruxolitinib)?

Before taking Jakafi, tell your Transplant Team about all the medicines you take, including vitamins and herbal supplements, and especially medicines for fungal or bacterial infections or HIV/AIDS. Taking Jakafi with certain other medicines may affect how Jakafi works.

Tell your Transplant Team about all your medical conditions, including if you have an infection or if you have or ever had tuberculosis (or been in close contact with someone who has it), hepatitis B, liver or kidney problems, skin cancer, or high cholesterol or triglycerides, or if you are on dialysis (Jakafi should be taken after your dialysis).

You should also tell your Transplant Team if you are pregnant or planning to become pregnant, or if breastfeeding.

How will I get Jakafi?

If you are in the hospital, your healthcare team will provide Jakafi for you. If you're at home, Jakafi will come to you from a specialty or mail order pharmacy. You will not be able to pick up Jakafi at a local pharmacy. It is important to let your local pharmacist know that you are taking Jakafi and also important to tell the specialty pharmacy about any other medicines, vitamins, and supplements you are taking. That way, your pharmacists can help you avoid any possible interactions between drugs.

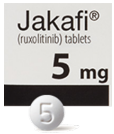
IMPORTANT SAFETY INFORMATION (continued)

Before taking Jakafi, tell your healthcare provider about: all the medications, vitamins, and herbal supplements you are taking and all your medical conditions, including if you have an infection, have or had low white or red blood cell counts, have or had tuberculosis (TB) or have been in close contact with someone who has TB, had shingles (herpes zoster), have or had hepatitis B, have or had liver or kidney problems, are on dialysis, have high cholesterol or triglycerides, had cancer, are a current or past smoker, had a blood clot, heart attack, other heart problems or stroke, or have any other medical condition. Take Jakafi exactly as your healthcare provider tells you. Do not change your dose or stop taking Jakafi without first talking to your healthcare provider.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

What dose should I take?

You should take only the dose of Jakafi your Healthcare Professional prescribes, following your Healthcare Professional's instructions.



Tablets and bottle shown are not actual size.

The recommended starting dose for most patients with chronic graft-versus-host disease is 10 mg taken by mouth twice a day.

Your Healthcare Professional will determine the appropriate dose of Jakafi for you by taking several factors into account, including:

- Results of your blood work, including liver function test
- Other medical conditions you may have
- Other medications you may be taking

Depending on these criteria, your Healthcare Professional may change your dose or have you stop taking Jakafi at some point. Do not change your dose or stop taking Jakafi without first talking to your Healthcare Professional. However, if you start bleeding, stop taking Jakafi and call your Healthcare Professional immediately.

It is important to take the dose you were prescribed and as often as prescribed. If you miss a dose of Jakafi, take your next dose as scheduled. **Do not take 2 doses at the same time.**

If you take more than the prescribed dose, call your Healthcare Professional or go to the nearest hospital emergency department right away. Take the bottle of Jakafi with you.

Helpful hint: It's important for you or your caregiver to keep track of the various medicines that you take and discuss them with your various Healthcare Professionals. Consider using the fold-out Medicine Diary inside this brochure to help record all prescription and over-the-counter medicines, vitamins, and natural/herbal supplements that you are taking.

How do I take Jakafi® (ruxolitinib)?

Take Jakafi exactly as your Healthcare Professional tells you. It is important to take Jakafi as prescribed.

In certain cases, your Healthcare Professional **may start you at a lower dose, temporarily reduce your dose of Jakafi, or interrupt or stop your dose**. Always follow your Healthcare Professional's directions.

Try to take your medicine at about the same time each day. It may help you remember to take your Jakafi if you take it at the same time as you perform another daily activity, like brushing your teeth.

You can take Jakafi **with or without food**.

How will my Healthcare Professional monitor me while I'm taking Jakafi?

Before you start treatment, and periodically during treatment, your Healthcare Professional may perform a blood test called a ***complete blood count***.

Your Healthcare Professional may also perform a blood test of your liver function.

The results of these tests can help your Healthcare Professional:

- **Monitor your blood counts and liver function** during treatment
- **Adjust your dose of Jakafi**, if necessary (most dosage adjustments will happen in the first couple of months but could happen any time during treatment)

Your Healthcare Professional may monitor your blood cholesterol levels, as you may have changes in these levels during your treatment with Jakafi.

Your Healthcare Professional may also perform regular physical examinations, update your medical history, or ask if you are taking any new medicines.

Do not stop taking Jakafi without speaking with your Healthcare Professional. However, if you start bleeding, stop taking Jakafi and call your Healthcare Professional immediately.

Helpful hint: The fold-out Medicine Diary, inside this brochure, lets you or your caregiver record your daily doses of medicine. It also provides space for listing your various Healthcare Professionals and their contact information—so everything is in one handy place for you and your caregiver.

IMPORTANT SAFETY INFORMATION (continued)
Women should not take Jakafi while pregnant or planning to become pregnant. Do not breastfeed during treatment with Jakafi and for 2 weeks after the final dose.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

Talking with your Transplant Team

It is important for you and your caregiver to talk to your Transplant Team about how you are feeling and how your condition is affecting you, even if you're not sure that how you are feeling is caused by your condition. Talking to your Transplant Team helps you both:

- Understand how your condition is affecting you
- Follow how your condition is changing over time
- Discuss options for managing your condition

How long will I need to take Jakafi® (ruxolitinib)?

How long you continue to take Jakafi depends on your unique situation and how you and your Healthcare Professional decide to move your treatment forward.

After you've been taking Jakafi for 6 months, and if you've stopped taking your steroids, your Healthcare Professional may begin to gradually lower your Jakafi dose—assuming any signs or symptoms of chronic graft-versus-host disease (GVHD) do not return or get worse during this lowering. If signs or symptoms of chronic GVHD do return or get worse during this time, your Healthcare Professional may increase your dose of Jakafi again.

Do not stop taking Jakafi without speaking with your Healthcare Professional. However, if you start bleeding, stop taking Jakafi and call your Healthcare Professional immediately.

Helpful hint: If you or your loved ones need additional support, our IncyteCARES program representatives can answer questions about Jakafi and connect you to helpful resources. See pages 30-31 for information.

IMPORTANT SAFETY INFORMATION (continued)

Low blood counts: Jakafi® (ruxolitinib) may cause low platelet, red blood cell, and white blood cell counts. If you develop bleeding, stop taking Jakafi and call your healthcare provider. Your healthcare provider will do a blood test to check your blood counts before you start Jakafi and regularly during your treatment. Your healthcare provider may change your dose of Jakafi or stop your treatment based on the results of your blood tests. Tell your healthcare provider right away if you develop or have worsening symptoms such as unusual bleeding, bruising, tiredness, shortness of breath, or a fever.

Please see Important Safety Information for Jakafi on pages 16–17 for related and other risks.

My Medicine Diary

Staying on track with your medicines after stem cell transplant can be challenging. This **Medicine Diary** is meant to help. It gives you a handy place to write down all your medicines and check them off as you take them each day—so you're less likely to forget.

Consider bringing your Medicine Diary to your healthcare appointments to share and discuss with your various Healthcare Professionals.

Following your healthcare team's recommendations is the **best way to keep moving forward** after transplant.

OPEN HERE

My Healthcare Team

Name: _____
Specialty: _____
Phone: _____
Email: _____

Name: _____
Specialty: _____
Phone: _____
Email: _____

Name: _____
Specialty: _____
Phone: _____
Email: _____

Name: _____
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Name: _____
Specialty: _____
Phone: _____
Email: _____

Name: _____
Specialty: _____
Phone: _____
Email: _____

One Day at a Time

List all your medicines once. Then check off your doses as you take them each day following your prescribing Healthcare Professionals' instructions.

Example:

Medication	Medicine 1	Medicine 2	
Dose	100 mg, 2x/day	75 mg, 4x/day	
Date 12/2/19	x x	x x x x	

Helpful hint: Be sure to talk with your prescribing Healthcare Professional if you have trouble taking your medicine or have missed doses.

Download more schedules online at **JakafiMedicineDiary.com**

Medication															
Dose															
Date															

IncyteCARES for Jakafi: Helping You With Access and Support

An Assistance and Support Program for Patients Prescribed Jakafi® (ruxolitinib)

At IncyteCARES for Jakafi, our team can help you understand your insurance coverage, explore financial assistance options, and offer ongoing support.

Coverage Verification

We can check with a patient's insurance plan about their coverage for Jakafi and any out-of-pocket costs required.

Insurance Assistance

We can help patients understand how their insurance plan works. We can also offer information about prior authorization requirements and appealing insurance denials or restrictions.

Delivery Coordination

We can arrange to have the patient's prescription for Jakafi filled by an approved specialty pharmacy and delivered directly to either the patient's home or Healthcare Professional's office.

Savings Program

For patients with commercial prescription drug coverage—eligible patients pay as little as $0 per month, subject to certain limits.*

Patient Assistance Program (PAP)

Free product is offered to eligible patients who are uninsured or underinsured for Jakafi.†

Temporary Coverage

For insurance coverage delays, eligible patients can receive a free short-term supply of Jakafi.†

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Patient Education and Support

Through our call center, IncyteCARES for Jakafi representatives can answer patient and caregiver questions about graft-versus-host disease and Jakafi.

Connection to Other Support Services

For patients who need additional support beyond what we can provide directly, IncyteCARES for Jakafi can offer information about other independent organizations that may be able to help.

Connect with IncyteCARES for Jakafi today!

Visit:
www.IncyteCARES.com

Or call:
1-855-452-5234
Monday through Friday,
8 AM – 8 PM ET

*Amount of savings for the purchase of Jakafi will not exceed $11,977 per month and $25,000 per year. Uninsured, cash-paying patients are not eligible. Not valid for patients insured through Medicare Part D, Medicare Advantage, Medicaid, and TRICARE or any state medical or pharmaceutical assistance program. Valid prescription for Jakafi for an FDA-approved indication or compendia-recognized use is required. Please see complete **Terms and Conditions** or call IncyteCARES. Update effective as of January 1, 2021.

†Terms, conditions, and additional eligibility criteria apply. Valid prescription for Jakafi for an FDA-approved indication or compendia-recognized use is required. Patients insured through Medicare Part D, Medicare Advantage, Medicaid, TRICARE, or a state medical assistance program are not eligible. Free product is offered to eligible patients without any purchase contingency or other obligation.

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For more information about Jakafi and chronic GVHD, visit **cGVHDinfo.com**