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November 16th, 2026

Dear 340B Covered Entity,

I am writing to inform you that effective January 1st, 2027, Incyte Corp. ("Incyte") is updating its 340B policy for Incyte Covered Products (described below).

What is not changing? Patients will continue to have uninterrupted access to Incyte Covered Products. All covered entities will continue to be able to purchase Incyte Covered Products at the 340B price and have them delivered to locations that are properly registered as a 340B covered entity or child site on the HRSA website.

What is changing for *covered entities*? Starting January 1st, 2027, except for the limited exceptions described below or in the attached FAQs, all registered 340B covered entities are subject to Incyte's 340B policy. Covered entities with an in-house outpatient pharmacy are eligible to place bill to/ ship to replenishment orders of 340B priced Incyte Covered Products shipped to that pharmacy, provided the covered entity submits 340B claims-level data for all 340B Incyte Covered Products dispenses through that pharmacy within 45 days of the product dispense.

A covered entity *without* an in-house outpatient pharmacy may designate one contract pharmacy location. Incyte will facilitate bill to/ship to orders of 340B priced Incyte Covered Products to that location only; provided that the one designated contract pharmacy is located within 40 miles of the HRSA registered covered entity parent site, and the covered entity submits 340B claims-level data for all 340B dispenses through their designated pharmacy within 45 days of the dispense. Incyte is committed to ensuring that each covered entity has at least one pharmacy location where it can receive shipments of 340B discounted Incyte Covered Products. If a covered entity is unable to identify an eligible contract pharmacy within 40 miles, Incyte will work with the covered entity to identify a suitable alternative.

If you are a covered entity without an in-house outpatient pharmacy, please designate one contract pharmacy location for Incyte's updated policy by December 20th, 2026, by visiting www.340BESP.com/designations. Users that have registered an account with 340B ESP™ can designate a contract pharmacy by navigating to the Entity Profile tab. For details on accessing the exceptions to this policy, please see the attached FAQs.

Claims Submissions Policy:

Effective January 1 st, 2027, all covered entity types subject to Incyte's 340B policy are required to provide claims data for pharmacy dispenses and medical claims from BOTH in-house pharmacy locations and contract pharmacy locations. Claims data is required to be submitted through the 340B ESP platform within 45 days of product dispense. Failure to provide timely, complete, and accurate data may be subject to temporary loss of access to 340B pricing until such data requirements are met. Incyte reserves the right to suspend or modify access to 340B pricing for covered entities that do not comply with the data submission requirements set forth by this policy, upon reasonable notice.

If you (covered entity) have not previously submitted claims data, please contact www.340besp.com to register and set up the submission process.

State Carve-Out Exemptions

This policy does not apply in states where prohibited by applicable state law. If applicable, states will be exempted from this policy according to the state exemption notifications provided outside this policy. Existing state carve-out exemptions will be unaffected by this policy change unless separately notified by Incyte.

In support of a smooth transition to our new policy, 340B covered entities should work with their contract pharmacy administrators and wholesalers to process any outstanding Bill To / Ship To replenishment orders in advance of the January 1st, 2027 effective date. 340B contracts administered by our wholesalers will no longer support provision of drugs purchased at the 340B discount price to contract pharmacies after January 1st, 2027.

Please reach out to support@340besp.com if you have questions about our updated policy.

Lydia Dolan

Regards,
Lydia Dolan
Vice President, U.S. Market Access

Incyte Covered Products

Product Name	NDC	Pkg Qty	Each Size/Description
Opzelura	50881-0007-05	1 (tube)	60 gram tube

FAQ:

A. Policy Scope:

Q: Which products are subject to Incyte's policy?
A: The policy applies to Opzelura® (ruxolitinib) cream 1.5% ("OPZELURA") attached to this FAQ ("Incyte Covered Products").

Q: Does this Policy apply to all Incyte products?
A: No. At this time this Policy applies only to Opzelura® (ruxolitinib) cream 1.5% (OPZELURA).

Q. Are Federal Grantees Subject to Incyte's 340B Policy.
A. Yes. Effective January 1st, 2027, all registered 340B covered entities, including federal grantees, are subject to Incyte's 340B policy. Federal grantees without an in-house pharmacy will be eligible to select a single contract pharmacy location to receive shipments of 340B priced Opzelura, provided the covered entity submits claims data within 45-days of the dispense, and the designated contract pharmacy is located within 40 miles of the covered entity.

Federal grantees with an in-house pharmacy will be eligible to purchase 340B priced Incyte Covered Products through their in-house pharmacy only and are required to submit 340B claims-level data for all 340B dispenses through that pharmacy within 45 days of the dispense.

Q: Which covered entity types does this Policy apply to?
A: This Policy applies to all registered 340B covered entities, including hospitals and federal grantees.

Q: Are covered entities in all states subject to this Policy?
A: This policy does not apply where prohibited by applicable state law. Covered entities located within applicable states may be exempt from Incyte's 340B policy. Incyte may modify, add, or withdraw state exemptions at any time.

B. Contract Pharmacy Eligibility & Designations

Q: My covered entity has a contract pharmacy relationship with a pharmacy that is owned by our health system. Is this pharmacy subject to Incyte's policy?
A: All contract pharmacies, including 340B contract pharmacies that are wholly owned by a covered entity, will NOT continue to be provided "Bill To / Ship To" replenishment orders of 340B priced drugs. A covered entity without an in-house outpatient pharmacy may designate one contract pharmacy location, including a wholly owned pharmacy, by visiting www.340BESP.com/designations.

Q: I have an in-house pharmacy that is capable of purchasing and dispensing Incyte Covered Products, but I don't use it to dispense Incyte Covered Products. Can I designate one contract pharmacy instead?
A: No, under Incyte's policy, if a covered entity has an in-house pharmacy capable of purchasing and dispensing OPZELURA, the entity must use that pharmacy and cannot designate a contract pharmacy to purchase Incyte Covered Products at the 340B price instead. Effective January 1st, 2027, covered entities with an in-house

pharmacy are also required to submit 340B claim-level data within 45 days of the dispense to the patient for all 340B dispenses. Failure to provide timely, complete, and accurate data may be subject to temporary loss of access to 340B pricing until such data requirements are met.

Q: What if my covered entity does not have an outpatient pharmacy at the location registered as a parent or child site on the 340B covered entity database?
If your covered entity does not have an in-house outpatient pharmacy capable of dispensing Incyte Covered Products, your entity may designate a single contract pharmacy location and Incyte will facilitate bill to/ ship to replenishment orders of Incyte Covered Products at the 340B price to that contract pharmacy; *provided that*: the one contract pharmacy is located within 40 miles of the HRSA registered covered entity parent site, and the covered entity submits 340B claims-level data within 45 days of the dispense. To make a designation, please visit www.340BESP.com/designations.

Q. How do I change my contract pharmacy designation?
A. 340B covered entities that do not have an in-house pharmacy capable of dispensing Incyte Covered Products to their patients can elect a single contract pharmacy every twelve (12) months. Changes to the single contract pharmacy can be made only by visiting www.340Besp.com/designations. Users that have registered an account with 340B ESP™ can navigate to the Entity Profile tab to make their contract pharmacy designation.

Q. How often can I change my contract pharmacy designation?
A. Covered entities that do not have an in-house pharmacy capable of dispensing Incyte Covered Products to its patients may change its contract pharmacy designation once every twelve (12) months *(from the date of first designation)* or more often if the designated contract pharmacy relationship is terminated from the HRSA OPAIS database.

Q. My 340B covered entity has contract pharmacy arrangements with multiple locations of the same pharmacy (e.g. six different Accredo pharmacy locations). Can I designate all locations of the same pharmacy?
Incyte's policy allows 340B covered entities that do not have an in-house pharmacy capable of dispensing Incyte Covered Products to its patients to designate only a single contract pharmacy location. Contract pharmacy locations are registered individually on the HRSA database and 340B covered entities are permitted to designate only a single contract pharmacy location which corresponds to a single contract pharmacy registration with HRSA. To make a designation, please visit www.340BESP.com/designations.

Q. How do I ensure that my contract pharmacy designation takes effect on January 1st, 2027?
A. For a covered entity's contract pharmacy designation to take effect on January 1st, 2027, its contract pharmacy selection needs to be made by December 20th, 2026. After December 20th, 2026, please allow ten (10) business days for the designation to take effect.

Q. How long does it take for my contract pharmacy designation to take effect if I make the designation after January 1st, 2027?
A. For contract pharmacy designations made after January 1st, 2027, please allow ten (10) business days for the designation to take effect.

C. Claims Submissions Requirements

Q: What is Incyte's In-House Pharmacy Claims Data Policy?
A: Incyte's In-House Pharmacy Claims Data Policy requires hospital and grantee covered entities to submit claims-level data (pharmacy and medical claims) for all 340B dispenses of applicable Incyte Covered Products that are

dispensed through the covered entity's in-house pharmacy(ies). This Policy is part of Incyte's broader 340B Program integrity initiative and is administered through the 340B ESP™ platform.

Q: What is an "in-house pharmacy" under this Policy?
A: An in-house pharmacy is a pharmacy that is: (i) 100% owned by the covered entity, (ii) capable of purchasing and dispensing Incyte Covered Products, (iii) licensed or authorized by the appropriate state regulatory body to dispense prescription medications, and (iv) is not listed on HRSA's OPAIS database as a contract pharmacy for the covered entity.

This definition does not include a pharmacy partially owned by your covered entity; a pharmacy owned by an entity other than your covered entity, including a parent or affiliated entity other than your covered entity. Merely listing a non-entity owned pharmacy (i.e., a contract pharmacy) as a “ship to” address on OPAIS, does not confer entity-owned status on the pharmacy. We may require eligibility information, such as auditable records, to confirm 100% ownership by your covered entity.

If Incyte observes a wholesaler is shipping 340B priced product to an in-house pharmacy at the covered entity’s street or shipping address(es), listed in HRSA OPAIS, as well as to contract pharmacy location(s), Incyte will notify the covered entity and work to resolve the non-compliant locations.

Q: What Claims Level Data must be submitted?
A: Covered entities must submit both pharmacy claims and medical claims data for all 340B dispenses of Incyte Covered Products that are dispensed through in-house pharmacies. Claims-level data should include sufficient information to identify the 340B transaction, including but not limited to the National Drug Code (NDC), quantity dispensed, TRx number, date of dispense, and the applicable covered entity identifier.

Q: Does Incyte require both pharmacy and medical claims data?
A: Yes. Covered entities must submit both pharmacy claims data and medical claims data for 340B dispenses of applicable products through in-house pharmacies. Both types of claims data are necessary to help identify duplicate discounts and to ensure comprehensive program integrity.

Q: How often must claims data be submitted?
A: Claims data must be submitted through the 340B ESP™ platform within forty-five (45) days of the date of 340B dispense. Incyte encourages covered entities to submit data on a rolling basis rather than waiting until the 45-day deadline.

Q: What happens if a covered entity fails to submit data within 45 days?
A: Failure to provide timely, complete, and accurate claims-level data in accordance with the timeline set forth in this Policy may affect a covered entity’s access to 340B pricing for Incyte Covered Products. Incyte reserves the right to suspend or modify access to 340B pricing for covered entities that do not comply with the data submission requirements set forth herein, upon reasonable notice.

Q: How do I register for 340B ESP™?
A: To register for the 340B ESP™ platform, visit www.340BESP.com.

Q. I already designated a single contract pharmacy for Incyte. Do I need to re-designate on 340B ESP™**?**
A. Covered entities who currently have a designation in place through 340B ESP™ do not need to re-designate but must begin submitting claims data to retain access to Incyte’s Covered Products 340B pricing at their designated contract pharmacy. They can begin submitting claims for Incyte by navigating to the Claims Data Submission tab.

Q. What if my 340B covered entity does not have a contract pharmacy within a 40-mile radius of my parent site?

A. If your covered entity does not have a contract pharmacy registered with HRSA that is within a 40-mile radius of the parent site, please contact support@340Besp.com to find an acceptable alternative pharmacy.

Q. Is Incyte requiring covered entities to have a HIN registered for the contract pharmacy that they designate?

A: Yes, a contract pharmacy must have a HIN assigned to it for a covered entity to designate it as its single contract pharmacy. This information is important for Incyte to manage its process with its wholesalers. If the pharmacy needs guidance or more information on how to get a HIN assigned, please reach out to support@340besp.com.