CORRECTION

Incorrect Data and Omitted Explanation for a Calculation: In the Original Investigation entitled “Financial Eligibility Criteria and Medication Coverage for Independent Charity Patient Assistance Programs” published in the August 6, 2019, issue of JAMA, some data were reported incorrectly. Table 4 should have indicated that assistance for generic drugs was available for Sabril, Zytiga, Reyataz, and Lexiva; for each of these 4 drugs, in the columns under “Generic Drugs,” under the headings “Total” and “PAN Foundation,” the numeral “0” should have been “1.” In addition, the row of data for “Abilify” should have been deleted. With these corrections, in the final “Total” row of Table 4, the “Brand-Name Drugs” columns should have been “55” for the “Total” column and “23” for the “PAN Foundation” column and the “Generic Drugs” columns should have been “25” for the “Total” column and “17” for the “PAN Foundation” column. Also, a statement explaining how the expense ratio was calculated was omitted. In the Methods section, at the end of the third paragraph, the final sentences should have been: “The expense ratio was calculated as patient assistance expense divided by total revenue as per the line items reported on form 990 or annual reports posted on each charity’s website. The calculation only included 1 calendar year. Other data and information from form 990 or financial statements were not included.” This article was corrected online.


Incorrect Patient Numbers Reported in Tables: In the Original Investigation entitled “Effect of Filgotinib vs Placebo on Clinical Response in Patients With Moderate to Severe Rheumatoid Arthritis Refractory to Disease-Modifying Antirheumatic Drug Therapy: The FINCH 2 Randomized Clinical Trial” published in the July 23, 2019, issue of JAMA, incorrect patient numbers and percentages were reported in Table 1 and eTable 2 in Supplement 3. In Table 1, the number and percentage of patients in the placebo group in region A should have been listed as 110 (74.3%), and they should have been 16 (10.5%) and 14 (9.5%) for the filgotinib, 100 mg, and placebo groups, respectively, in region D. In eTable 2 in Supplement 3, the numbers and percentages of patients with 20% improvement in American College of Rheumatology criteria in region E should have been listed as 11 (91.7%), 9 (60.0%), and 2 (15.4%) in the filgotinib, 200 mg; filgotinib, 100 mg; and placebo groups, respectively. This article was corrected online.


Incorrect Bars in Graph Showing Gene Mutations: In the Original Investigation entitled “Association of Patient Characteristics and Tumor Genomics With Clinical Outcomes Among Patients With Non–Small Cell Lung Cancer Using a Clinico-Genomic Database” published in the April 9, 2019, issue of JAMA, there were errors in the height of the bars representing the percentage of cases with gene alterations of unknown significance in Figure 2. This article was corrected online.


Guidelines for Letters

Letters discussing a recent JAMA article should be submitted within 4 weeks of the article’s publication. Letters received after 4 weeks will rarely be considered. Letters should not exceed 400 words of text and 5 references and may have no more than 3 authors. Letters reporting original research should not exceed 600 words of text and 6 references and may have no more than 7 authors. They may include up to 2 tables or figures but online supplementary material is not allowed. All letters should include a word count. Letters must not duplicate other material published or submitted for publication. Letters not meeting these specifications are generally not considered. Letters being considered for publication ordinarily will be sent to the authors of the JAMA article, who will be given the opportunity to reply. Letters will be published at the discretion of the editors and are subject to abridgement and editing. Further instructions can be found at http://jamanetwork.com/journals/jama/pages/instructions-for-authors. A signed statement for authorship criteria and responsibility, financial disclosure, copyright transfer, and acknowledgment are required before publication. Letters should be submitted via the JAMA online submission and review system at https://manuscripts.jama.com. For technical assistance, please contact jama-letters@jamanetwork.org.

Section Editor: Jody W. Zylke, MD, Deputy Editor.