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64,185 patients received direct, sustained assistance from PAF this year, up 33% from last year.
A message to our friends…both old and new…

This fiscal year was a landmark year for Patient Advocate Foundation as our patient volume grew to 64,185 patients, an increase from 48,364 patients last year, served by more than 200 fulltime employees. PAF relocated to a new national headquarters formerly occupied by Nextel who donated furnishings and information technology infrastructure of almost one million dollars. The PAF team, including our outstanding Board of Directors and our Scientific Committee members, personify excellence routinely, for which they were recognized by President Obama in his congratulatory letter shared with our guests at our formal opening and by Congressman Robert C. Scott who read into the minutes of the Congressional Record on the floor of the United States House of Representatives attributes to their excellence and that of the leadership of PAF. Additional congratulations were received from many others including Senator Jim Webb, Senator Mark Warner, Congressman Rob Wittman and President of the PAF Board of Directors, Christian Downs as well as Dr. Bruce Avery, sustaining Executive Board member from Tennessee.

Patient Advocate Foundation has been ranked as a four star charity, the highest designation awarded nationally, by the Charity Navigator, “America’s premier charity evaluator”. Quoting from their letter sent by Ken Berger, CEO, “PAF executes its mission in a fiscally responsible way, and outperforms most other charities in America. This exceptional designation from Charity Navigator differentiates Patient Advocate Foundation from its peers and demonstrates to the public it is worthy of their trust.” This designation is a tribute to the leadership and management of Patient Advocate Foundation by the President of Mission Delivery, Beth Patterson and President of Operations, Fran Castellow joined by their Executive Roundtable colleagues cited in this Annual Report and to the selfless service of the compassionate professionals who serve our patients at PAF. The unselfish contributions of our Executive Board of Directors and our Scientific Committee physicians and researchers also contributed to this recent recognition of PAF.

Passage this year of the Patient Protection Affordability Care Act included insurance reforms built across more than one and one half decades of PAF patient data documenting access to healthcare issues experienced by more than 500,000 patients who have been served by Patient Advocate Foundation since 1996. Through these patient experiences, Patient Advocate Foundation contributed significantly to the insurance reform measures providing data to drive the development of policy language eliminating pre-existing conditions for both children and adults. Data capturing the experiences of thousands of families moved into bankruptcy due to medical debt accrued when insurance policy lifetime limits were reached supported the inclusion of the elimination of lifetime limits on health insurance benefits. Coverage for children on their parent’s policy up to the age of 26 years was also supported by PAF data as was the implementation of caps on annual out-of-pocket expenditures by individuals and families. To the courageous patients and their loved ones who allow PAF to serve them, thank you, for you have contributed to improved health insurance benefits for millions of Americans.
Our patients do capture who we are far more eloquently than those of us who are privileged to serve them, so with this acknowledgement, I wish to close my greetings to you with three greetings received from our patients this year. May you be as touched as I and may you each know the gratitude we feel for your support of our mission and purpose.

Dear Heroes,
A few months ago I received an unexpected bill from my oncologist’s office for more than $1,800. I was shocked to learn that my insurance plan had a $50.00 co-pay for each of the many Neupogen injections I had received…

I’ve been unable to work due to my illness and had no idea how I’d ever be able to pay this bill, let alone cover the co-pays that would be generated by the remainder of my treatments. My oncologist’s office gave me the names of several organizations to contact for assistance, but they are diagnosis-specific and don’t offer assistance for ovarian cancer. Then one of the organizations suggested I call PAF. From the very first conversation with your counselor, I felt that someone cared about finding a solution. Your counselor took time to ask the right questions. Imagine my relief and sense of hope when she advised me PAF could help!

As far as my husband and I are concerned, you all are angels and an answer to prayer.

Diana
California

Dear Sir:  
I’m writing this letter to express my heartfelt appreciation to the PAF. I have worked hard all my life and have been fortunate enough to have never been unemployed. I’ve never drawn an unemployment check or received any form of assistance. At 58 years of age, when my cancer diagnosis reached me I had never stayed overnight in a hospital. Along with the worry about my future and medical condition I had the added worry of medical bills while receiving only 60% of my pay (through disability benefits). The assistance from your foundation has greatly relieved my stress. You have restored my faith in humanity. I am very grateful for your financial assistance.

Ken
New York

Dear Laura, (PAF Case Manager)  
Thank you for your foundation’s most welcome grant of $2,000.00 to assist in co-pays for the medication prescribed in relation to my diagnosis. I am the mother of three and my youngest is six years old when I received the news that I had cancer. One day last spring I returned my doctor’s call on my lunch hour at school where I was a teacher, and received my diagnosis. An hour later, I went into a meeting where I was being laid off. I remember feeling an odd sense of relief that I would not have to look for a new job, since I was going to be dead!

That wasn’t the last time being dead looked like a good option…The next time came when I looked at the bills for my treatment. We were responsible for paying $7,659.00. My family and I will always be grateful to the PAF for assistance given to us during this period in our lives.

Craig and Theresa
Colorado

Respectfully submitted:

Nancy Davenport-Ennis
Chief Executive Officer and Co-Founder
We are now well into reforming our health care system, and whether it happens by legislation, regulation, or the free market, the voice of the patient must always be heard. I am proud to write that Patient Advocate Foundation (PAF) remains committed to its core mission of safeguarding patients in need.

PAF continues to assert itself as a leader among advocacy organizations by championing access to quality healthcare and preserving financial stability among patients who face serious or life-threatening diseases.

Look at our accomplishments this year. PAF professional staff provided direct, sustained assistance to more than 64,000 patients. This involved more than 800,000 contacts to relevant stakeholders in order to bring resolution to healthcare access issues. Staff have worked tirelessly on behalf of patients to negotiate write offs, charity care access, and to resolve coding/billing errors. The value of debt relief obtained by PAF patients tops a staggering $17.5 million. Since inception in 2004, the PAF Co-Pay Relief Program has served more than 36,000 patients and provided more than $96 million in cash assistance. Additionally, 2,393,430 pages were viewed this year by PAF website visitors.

I want to thank each member of the staff. Because of their hard work and selfless devotion to America’s patients, all of our success is possible.

In reality our healthcare system will always be changing and reforming. One constant, however will be the commitment of the Patient Advocate Foundation to be there for patients. From navigating a complex insurance issue to offering a kind word and encouragement, if you are a patient PAF is here for you. Always.

On behalf of the Board of Directors of Patient Advocate Foundation, we thank the leadership, staff, patients, and supporters for their commitment.

Christian Downs
President, Board of Directors
PATIENT ADVOCATE FOUNDATION

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Founder & CEO
Patient Advocate Foundation

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Patient Advocate Foundation

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Health Disparities Education, Awareness, Research & Training (HDEART) Consortium
Department of Health Disparities Research
The University of Texas
M. D. Anderson Cancer Center

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Rocky Mountain Blood & Marrow Transplant Program
Rocky Mountain Cancer Centers

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US Oncology (Retired)

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The Honorable Pat Dougherty
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Richard D. Carter, PLLC

Sheldon Weinhaus, Esquire
Weinhaus & Potashnick

Edward G. Connette, Esquire
Essex Richards, PA
Patient Advocate Foundation (PAF) was pleased to partner for a second year with Breakaway from Cancer (BFC), a national fundraising and educational initiative founded by Amgen in 2005 as a complimentary component to the Amgen Tour of California (AToC), a world-class professional cycling event. The goal of BFC is to raise awareness of the important resources available to cancer patients including prevention, education, patient care, advocacy and financial support.

“In Patient Advocate Foundation was honored to partner in the 2010 Breakaway from Cancer initiative as Amgen raises awareness of the many beneficial resources available to cancer patients during what can be an uphill battle,” said Nancy Davenport-Ennis, President and CEO of Patient Advocate Foundation. “Seventy-six percent of the patients contacting PAF in 2009 were diagnosed with cancer, so we know first-hand the importance of educating cancer patients about their options. We recognize that it takes more than one person to fight cancer and we hope that through this team effort, we can help cancer patients cross that finish line!”

In addition to supporting the patient programs and services offered by Patient Advocate Foundation, this year’s Breakaway from Cancer also raised funds to support the Prevent Cancer Foundation, The Cancer Support Community and the National Coalition for Cancer Survivorship. Additional nonprofit partners in the initiative include The Lance Armstrong Foundation, The Patrick Dempsey Center for Cancer Hope & Healing and Stand Up to Cancer.

Being a partner in Breakaway from Cancer this year provided a consistent and coordinated opportunity to facilitate wide distribution of information to the public attending the BFC related events, educating them about the services provided by PAF. Lastly, and certainly most importantly, BFC has created a one of its kind joint partnership between four of the leading patient advocacy organizations serving the cancer community. Working together, we have made great strides towards providing comprehensive patient education and navigation services to the public including messaging about cancer prevention, providing support during diagnosis and treatment phases, bringing remedy to patient care barriers and offering survivors opportunities to give back. PAF is appreciative of the partnership we have with Amgen and the BFC partners…it take a team to fight cancer and we are proud to be part of the team.

As a partner, PAF placed great emphasis on promoting BFC this year in an effort to raise awareness of the initiative. PAF shared information about BFC with the public via our PAF website, PAF Facebook page and PAF LinkedIn account as well as executed targeted, personalized communication strategies to patients and providers who work and live in California as well as the cities hosting LiveStrong Challenges throughout 2010. Additionally, in May 2010, we employed earned media strategies, advertising and the distribution of a Press Release nationally to promote the BFC partners, and the impending AToC. These efforts garnered over 1 million reader impressions for BFC in the California markets.
2009-2010 Highlights

Breakaway from Cancer

PAF staff exhibited at the BFC Charity Rides in both Thousand Oaks and Santa Rosa, California in the Spring of 2010, precursor events to the Amgen Tour of California. PAF was able to offer on-site education and counseling with regard to access to care and insurance concerns - bilingually in English and Spanish, distributing educational materials to those we interacted with. Of the estimated 500 attendees at both events Patient Advocate Foundation acquired personal contacts within the local community, and contacts among local and regional healthcare personnel – physicians, nurses, social workers, scientists, and other influential professionals. One local cancer survivor expressed her appreciation stating that Patient Advocate Foundation enabled her to maintain her insurance coverage through a transitional time in her life.

In May, 2010 several PAF staff members, including Nancy Davenport-Ennis, Brendan Bietry, Senior Case Manager and Jamilla Williams, Director of Case Management, participated in the 9-day Amgen Tour of California, exhibiting in the BFC booth at Festival Park in each host city. Brendan Bietry addressed a group of cancer survivors at the Breakaway Mile pre-event in Santa Cruz, CA and held the BFC banner high during the Breakaway Mile March. He also served on the judging panel that selected Trisha Bland, a local cancer survivor of Bakersfield, CA to participate in the stage winning jersey presentation. Jamilla Williams addressed the local contingency in Modesto, CA and had the opportunity to celebrate with cancer survivors and their families within the community during the Breakaway Mile. Additionally, PAF was granted the honor to meet the Breakaway Mile Champion, Sandy Howard. During Sandy’s emotional battle with cancer, she self-published a book entitled “Life After Chemo”, which was available to the Modesto community attending the Breakaway Mile. The book, which sits on the bookshelf in the PAF case management suite, serves as an inspiration to the staff and the patients we serve.

Additionally, Nancy Davenport-Ennis spoke at the Survivor Mile pre-function event at Bakersfield, the PAF Stage of BFC, and had the honor of speaking personally with the Mayor of Bakersfield, The Honorable Harvey Hall, educating him about BFC and PAF while Alan Richardson, Chief Development Operations Officer spoke at the Survivor Mile pre-function event at Thousand Oaks.

Throughout the Amgen Tour of California, Patient Advocate Foundation continued to make an indelible impression on the various communities that hosted the race. PAF was able to distribute thousands of educational publications, t-shirts, and magnets in addition to providing live web demonstrations of the recently launched “National Underinsured Resource Directory” an online tool for underinsured patient’s right at the booth during each state of the race.

Both local and national PAF representatives proactively addressed the crowds – many individuals approaching the Breakaway from Cancer tent have already benefitted directly from our patient services in the past, most notably those who were assisted by our Co-Pay Relief program. A cancer survivor who attended the Big Bear Stage and visited the BFC booth expressed her appreciation to PAF with these words “your group’s advocacy and concern on behalf of cancer survivors like myself moved me greatly. Thank you for honoring me by allowing me and my boyfriend to be so close to the finish line action so comfortably and graciously.”
PAF is excited to announce that in April 2010, Patient Advocate Foundation relocated its National headquarters office to Hampton, Virginia. The relocation was made possible by the support of the building owner, Lexington Group, LLC who sponsored the required build out of the office space to meet our specific needs as well as the generous gift of office furnishings and technology infrastructure by the former tenant, Sprint Nextel. The combined value of these generous donations top nearly 1 million dollars and without them, the relocation would not have been possible.

While the new Headquarters office location is a mere 6 miles from the previous office, the new facility offers greater workflow functionality, a robust, state of the art technology center, increased security controls both in and outside of the facility, improved employee training locations and an overall enhanced work environment for our employees. Collectively, the improvements to our headquarters office have resulted in greater program administration efficiencies, ease of technology management, strengthening of security controls and have assisted in maintaining our high employee satisfaction levels.

PAF marked the official grand opening of its new national headquarters in Hampton Roads, Virginia with a widely attended ribbon-cutting ceremony. President Obama sent a personal letter of congratulations for PAF’s continued service to Americans who are challenged with hurdles to accessing important health care services. Senator Webb’s regional Director Charles Stanton joined Congressman Robert C. Scott (D-3rd-VA), Virginia Senator John Miller, Delegates Glenn Oder and Robin Abbott, as well as Hampton Vice Mayor George Wallace and former Newport News Mayor Joe Frank, to formally participate in the ribbon-cutting ceremony. Representatives from donor organizations including American Cancer Society, Lance Armstrong Foundation, Millennium Pharmaceuticals, Novartis and sanofi aventis were also in attendance. Local dignitaries from Hampton Roads included James Eason, Hampton Director of Economic Development, and representatives from Riverside Health Systems and Sentara Health Systems.

Personal letters of congratulations from Virginia’s U.S. senators, Mark Warner and Jim Webb, were read by officials from their staff who participated in the ceremony. “You are a true example to organizations aspiring to improve the health of Americans” said Senator Mark R. Warner.

“For the last fourteen years, The Patient Advocate Foundation has served Virginia residents and Americans across the country struggling with illness and access to care issues who have nowhere else to turn,” said Congressman Robert C. Scott. “As PAF moves to its new headquarters in Hampton, I look forward to continuing our collaborative work to ensure that patients across the nation are protected from health care discrimination and the many forms that it takes.”
2009-2010 Highlights

“We are pleased to expand our national headquarters to accommodate staff growth necessary to meet the demands of the patient volume and case complexity. Moving to a larger space was necessary to support the growing number of patients we serve and the growing number of programs we provide,” said Nancy Davenport-Ennis, Founder and CEO of Patient Advocate Foundation. “For the last 14 years, PAF has been dedicated to improving the quality of life of patients diagnosed with chronic, debilitating and life threatening conditions access to health care issues that if unresolved threaten to stop or delay therapeutic intervention, PAF is dedicated to assuring that patients across the nation are protected from health care discrimination in the many forms that it takes.”

“Our healthcare delivery system can be quite difficult to navigate, and your efforts to help bridge the gap between patient and provider are admirable,” wrote Congressman Robert J. Wittman (R-1st-VA). “At the same time, your faithful advocacy on behalf of all of those with life-threatening illnesses is essential for ensuring that patients all over the country get fair and proper treatment. I hope your new location provides you with a comfortable atmosphere for which to extend your helping hand.”

Davenport-Ennis states, “The opening of this expanded national headquarters is a tribute to years of dedicated service to patients by the members of our executive, scientific and honorary boards of directors. In combination with the outstanding operational leadership of our PAF Management team working with the full time professional team members of PAF. The generosity of our supporters, including corporate donors, community businesses, national nonprofit organizations, our United States government as well as our own state of Virginia and local government leaders have underwritten our continued opportunity to meet the needs of families in crisis due to acute illness.”

Patient Advocate Foundation Launches the National Underinsured Resource Directory

In February, 2010 PAF, through the support of the Patient Action Council Delegates, unveiled The National Underinsured Resource Directory, which is intended to help underinsured individuals and families locate important resources and seek alternative coverage options or methods to cover their healthcare needs.

The Patient Action Council Delegates are nurses and healthcare thought leaders of national advocacy initiatives within five of our nation’s leading Pharmaceutical and Biotechnology companies. Each year, the PAF Patient Action Council addresses one major healthcare access issue. This year, the issue selected was the development of a national resource for underinsured Americans, who have health insurance benefits that do not adequately protect them from high out-of-pocket medical expenses. Due to changes in insurance benefits and limited caps, the
number of underinsured American adults has risen dramatically to an estimated 25 million in 2007 as reported by The Commonwealth Fund. In the last year, PAF saw an increase of 23.17% in underinsured patient issues.

The National Underinsured Resource Directory is available through an online interactive tutorial program, and a written publication that supports this program. The comprehensive online tool helps underinsured Americans faced with high out-of-pocket costs locate valuable resources and action steps to provide financial relief. The information is also provided through an easy to manage pocket envelope of resource cards offering suggestions for resolving specific issues as well as a list of national and state specific resources.

“We are pleased to provide this valuable tool to the millions of Americans facing problems securing critical medical care services due to their inadequate health insurance benefits,” said Nancy Davenport-Ennis, President and CEO of PAF. “Patients across the country will be able to gather information from the Q&A and action steps we have put together, improving their access to the quality care they need and deserve.”

To access The National Underinsured Resource Directory, visit: http://patientadvocate.org/help4u.php

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**Patient Advocate Foundation Receives 4-Star Rating for Sound Fiscal Management from Charity Navigator**

PAF was pleased to learn that we earned Charity Navigator’s 4-star rating for sound fiscal management this year. PAF was also rated as the second highest “top-notch” charity for excelling in three areas: financial, accountability and transparency, and effectiveness and results.

Charity Navigator, America’s premier independent charity evaluator, rates charities on their ability to efficiently manage and grow their finances, and works to advance a more efficient and responsive philanthropic marketplace by evaluating the financial health of over 5,500 of America’s largest charities. Approximately one quarter of the charities evaluated by Charity Navigator have received their highest rating, indicating that PAF executes its mission in a fiscally responsible way, and out-performs most other charities in America.

“On behalf of Charity Navigator, I wish to congratulate Patient Advocate Foundation on achieving our coveted 4-star rating for sound fiscal management,” said Ken Berger, President/Chief Executive Officer of Charity Navigator, in a letter to PAF. “This "exceptional" designation from Charity Navigator differentiates Patient Advocate Foundation from its peers and demonstrates to the public it is worthy of their trust.”

“Patient Advocate Foundation is honored to receive this rating from Charity Navigator, and we know that our mission to put the healthcare needs of all Americans first has never been more important as we move into a new era of healthcare reform,” said Nancy Davenport-Ennis, President and CEO of PAF. “Since its inception in 1996, PAF has worked to help Americans efficiently access the quality healthcare they deserve. Those who are interested in donating to PAF can do so knowing that PAF is an organization that is fiscally responsible and effective.”
808,544 contacts were made by PAF professional staff on behalf of patients to relevant stakeholders in order to bring resolution to healthcare access issues, up 44% from last year.
Direct Patient Services Division

Our Commitment to Service

<table>
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<th>FY 2009/2010</th>
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<tbody>
<tr>
<td>Direct Patient Services Division Summary</td>
<td></td>
</tr>
<tr>
<td>New Case Count</td>
<td>46,890</td>
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<tr>
<td>Total Email Contacts for</td>
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<tr>
<td>Direct Patient Services</td>
<td>17,295</td>
</tr>
<tr>
<td>Total Patient Case Count</td>
<td>64,185</td>
</tr>
<tr>
<td>Total Contacts for Case Resolution</td>
<td>808,544</td>
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</tbody>
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Patient Advocate Foundation has been helping patients solve their insurance and health access problems through our Direct Patient Services Division for over 14 years. Services have been provided by our professional case management staff, the Co-Pay Relief (CPR) staff and the Med CareLine staff. Case management was and continues to be PAF’s main core competency with Co-Pay Relief emerging as a second core competency in 2004. When PAF opened its doors in 1996, there were 157 patients served. In FY 2009/2010, Patient Advocate Foundation was able to serve 64,185 patients, all while remaining true to the mission.

Mission Statement

Patient Advocate Foundation was established in 1996 as a national 501(c)3 organization with a mission of “safeguarding patients through effective mediation assuring access to care, maintenance of employment and preservation of their financial stability.” PAF serves as an active liaison between patients and their insurer, employer and/or creditors to resolve insurance, job retention, and/or debt crisis matters relative to their diagnosis through case managers, doctors and health care attorneys.

For FY 2009/2010, the Direct Patient Services Division is reporting that there were 808,544 contacts on behalf of patients to the stakeholders necessary to resolve their healthcare access issues. This averages 12.59 contacts from a PAF professional case manager or from a co-pay relief specialist. These contacts are made to a patient’s healthcare provider, social workers, governmental agencies, other non-profit social service and healthcare organizations, employer representatives, creditors, insurance companies and others who may be able to bring resolution to the patient issues for every patient served.
Direct Patient Services Division

PAF’s Direct Services provided daily to patients at no cost include:

- Negotiating pre-authorization approvals
- Providing assistance in expediting the appeals process
- Coordinating benefits
- Negotiating resolutions to coding and billing errors
- Providing assistance in expediting applications for SSDI, enrollment in Medicare, Medicaid, SCHIPS, and other social programs
- Resolving debt crisis related to diagnosis
- Mediating insurance appeals
- Negotiating access to pharmaceuticals agents, chemotherapy, medical device and surgical procedures
- Brokering resources to supplement the limits of insurance and to assure access to care for uninsured
- Resolving insurance issues in the public and private sectors
- Providing Co-payment assistance to medically and financially qualified individuals

Our Core Competency

Through the process of assisting patients with their access to care issues, our professional Case Management staff captures 241 fields of data on each patient that is representative of the unique patient issues that are being resolved by our staff. From this data, PAF authors and publishes the Patient Data Analysis Report (PDAR) annually. The PDAR demonstrates the populations being served as well as the patient access trends that are present in the current healthcare environment. Data from the Patient Data Analysis Report has been mirrored in the context of this FY 2009/2010 Annual Report, reflecting the patient experience from July 1, 2009 to June 30, 2010. Data is presented in graphical form in an effort to clearly define who PAF is serving, what the needs of the patients are and what resolutions have been brought to these issues.

In FY 2009/2010, 61.83% of the patients served were female while 38.17% were male, demonstrating a less than 1% increase in the male population over last fiscal year. Our male population has steadily increased year after year beginning in FY 2003/2004 when 34% of our patients were male. This increase can be attributed to the opening of our Co-Pay Relief program in 2004 with the inclusion of a prostate cancer silo as well as our partnership with the Lance Armstrong Foundation.
PAF served patients of all ages with 4.26% being in the birth to 25 age range, 17.45% were aged 26-45, and over half, 51.6%, of the PAF patients were between the ages of 46 and 65 years old. Patients who are over age 65 represented 26.67% of the PAF patient population in FY 2009/2010. The number of patients aged 65 or older increased 11.44% this fiscal year. The PAF **Senior Services Division**, was created in 2004 in response to the creation of Medicare Part D. The goal is to educate and assist patients with Medicare, insurance, debt crisis and access to care issues. A member of the Senior Services Division works one on one with a beneficiary. They also attend local and national outreach involving the Centers for Medicare and Medicaid Services (CMS) and its beneficiaries and as a result are asked throughout the year to review coverage and marketing material for the Medicare health care plans.

**Case managers assigned to the Senior Services Division participated in the following outreach events:**

- Local community resource event with the Virginia Oncology Associates offices and their transplant patients
- Hats Off to Caregivers, local Virginia event to honor caregivers and nursing staff (Committee chair and volunteer)
- Attended monthly meetings with the Peninsula Task Force on Aging, (120 members and growing)
- Attended and maintained a booth event with the Ferguson Community Aging Forum at Christopher Newport University, Newport News, VA
- Attended the CMS Part D Symposium in Baltimore, MD
- Attended the CMS NMEP Public and nonprofit education meeting in Washington D.C.

**Senior Services staff also participated in the following media events with direct patient assistance or comment to Medicare:**

- Report on Chronic disease and Special Needs plans in a joint effort with National Patient Advocate Foundation (NPAF) to CMS
- Submitted comments to CMS on the proposed rule of revision of Medicare Advantage plans and the Part D benefits
- Participated in comment for the Henry Kaiser Family Foundation article involving Special Needs Plans
- Submitted comments on the Medicare call letter in a joint effort with NPAF to CMS
- Participated in a NBC “Date Line” Documentary involving one of our disabled patients involving access to clinical trials

**Some of the patients assisted through Senior Services state:**

“Thank you for your time and willingness to help others in need”

“I think you were sent our way as a form of an angel because that is what you are to us. We were so very blessed to have come in contact with a human as sweet as you”.
PAF assisted patients of many ethnicities with 72.06% of patients classifying themselves as White/Caucasian, 15.74% considered themselves black or African American and 8.67% were Hispanic/Latino. We saw a 1.54% increase and 0.25% increase in the White/Caucasian and Hispanic/Latino populations respectively this year over last, while seeing a decrease in the African American population of 1.71%.

The racial demographics of the PAF patient population are largely consistent with the statistics presented in the Census Bureau’s 2008 American Community Survey that reported the US Population as being 74% White American, 15.1% Hispanic or Latino of any race, 12.3% Black American, 4.4% Asian American, 0.8% American Indian and Alaska Native, 0.1% Native Hawaiian or other Pacific Islander, 5.8% some other race and 2.2% two or more races.

PAF has two well established disparate outreach programs that are effective in offering culturally sensitive education and direct assistance to patients from both the African American community and the Spanish speaking communities.

The National African American Outreach Program (NAAOP) is designed to make more African Americans across the US aware of the case management services provided by PAF. NAAOP seeks to reduce healthcare disparities and assist individuals in obtaining a better quality of life. In FY 2009/2010, NAAOP participated in 116 local, regional and national events, reaching over 30,500 individuals. Dr. Mary T. Christian, NAAOP consultant, former Virginia Delegate and a PAF Honorary Board member has been a speaker at events such as the NAACP Annual Conference in New York with over 15,000 attendees as well as the Intergenerational Conference in San Francisco, CA. NAAOP members also attended the Sickle Cell Association Annual Convention in Orlando, FL, the Virginia Black Expo in Virginia Beach, VA and the African American Men’s Health Forum held in Hampton, VA.

Patients assisted by NAAOP had this to say:

“I am very pleased to have had Vonya as my caseworker who is so polite, prompt & professional. She patiently heard my case as I asked many questions and right away contacted the insurance company within the same day. Thank you again Vonya (I don’t know what I would have done without you)”

“You all are so great. I thank all of you for your help that you have given me. I just want you to know how hard it would be if it wasn’t for good people like you all.
Thank you so very, very much”
Direct Patient Services Division

National Hispanic/Latino Outreach Program

The National Hispanic/Latino Outreach Program (NHLOP) wrote and translated into Spanish a new “A Greater Understanding…” publication. The new publication “Su Bienestar, una guía Para La Comunidad Hispanic/Latina” (Your Well-Being, A Health Guide for the Hispanic/Latina Community), is a health guide specific to health concerns in the Hispanic/Latino population in the United States. Several months of research was conducted in order to accurately address major health concerns in the publication.

The NHLOP team has also been, throughout the year, conducting educational presentations in partnership with the Leukemia & Lymphoma Society’s National Educational Programs. Another educational program, hosted at Gilda’s Club in New York City “Insurance Matters” specific to the Hispanic/Latino population, also received great feedback from its attendees. Participants in both events immediately contacted PAF for information regarding healthcare legislation and showed interest in volunteering in their specific localities. Many reached out to PAF for case management assistance.

A case manager in our San Diego Office attended the Regional Cancer Resource Center event which focused on rural minority health in the underserved regions in the State of California. Additionally, Wanda Febus, NHLOP Director, conducted a webinar with over 250 current Avon Foundation partnership members. In total, NHLOP case managers attended 97 outreach events in the States of California and New York with a total of 250 individual contacts and distribution of over 300 Spanish publications in these States. At the national level, NHLOP conducted 512 outreach events with over 2,000 attendees and distribution of over 500 Spanish PAF publications. They have also participated in a total of 4 conferences including the Latina Symposium and the Hispanic Medical Associations 14th Annual Conference in Washington, D.C.

Early Detection and Survivorship of Cancer in the Underserved Population

In 2009, PAF was awarded a second five year Cooperative Agreement with the Centers for Disease Control, the Early Detection and Survivorship of Cancer in the Underserved Population (SCUP). Now in year two, the goals of SCUP are to increase survivorship of cancer and enhance the quality of life in the underserved population by providing direct case management services to patients with breast, cervical, ovarian, colorectal, prostate and skin cancers. PAF provides outreach and education to increase awareness of our services available to the uninsured, underinsured, minority and disparate populations.

In FY 2009/2010 PAF assisted 3,927 patients through SCUP who requested assistance to access treatment and care for their disease, medication, application assistance for public benefits and resolving debt crisis issues. Two new publications were specifically created for one of the targeted populations during the fiscal year. Promoting a Healthier American Indian and Alaska Native Community was written by the PAF Publications Committee and Your Well-Being, A Health Guide for the Hispanic/Latino Community was written and translated by the PAF NHLOP team for the SCUP grant.

The CDC promoted webinars throughout the year to educate the Program Directors for state Comprehensive Cancer Control Programs across the United States. The August and September webinars were presented as a Lunch and Learn and featured PAF. This gave PAF the opportunity to let the Program Directors learn about the services available to patients. This resulted in direct requests from North Dakota state programs for future webinars specifically for them.

Conferences attended were the National Indian Health Board Conference, Washington, DC, the 32nd Annual Breast Cancer Symposium Conference and the CDC National Comprehensive Cancer Control Leadership Institute meeting in Los Angeles, CA. PAF has exceeded its goals and objectives under this grant and will continue to support the efforts of education and outreach to the underserved population.
The top ten states that the patients came from in FY 2009/2010 were Florida (17.70%), Texas (14.93%), California (12.54%), Virginia (9.78%), Georgia (9.43%), New York (8.48%), Ohio (8.09%), Pennsylvania (7.31%), North Carolina (5.93%) and Illinois (4.66%). When comparing the states from which the patient cases originated to the states, based on population density, that top the United States Census Bureau’s 2009 estimates, all ten states listed above are among the top twelve (12) states, by population, per the census. During FY 2009/2010, Florida and Texas remained the top states of residence for PAF patients. California and Virginia ranked third last year, with California moving into a solo third place this year followed by Virginia in fourth.

New Jersey had been 10th last year but was replaced by Illinois as number 10 this year at 4.66%.

Patients learn about PAF and its services in many ways. Over our 14 year history PAF has become a trusted source for the provision of direct patient assistance for non-profit social service and healthcare organizations, governmental agencies, members of the United States Congress, providers’ offices, clinics, hospitals and media outlets. In FY 2009/2010 the American Cancer Society (ACS) is the top referral source to the PAF Direct Patient Services team (41.29%) with Lance Armstrong Foundation (LAF) as the second most common referral source (15.28%) representing a 56% increase over FY 2008/2009. Patients also learn about PAF and our services from media outlets, friends and family, healthcare providers including social workers and physicians, as well as patients who have been previously served by PAF. These sources, along with ACS and LAF are among the top ten referral sources for PAF patients.
In FY 2009/2010 Patient Advocate Foundation completed the second year of its partnership with the American Cancer Society. The goal of the partnership is to ensure that cancer patients are able to access affordable care and pharmaceuticals and are provided case management services to resolve their insurance and job retention issues related to their diagnosis. Patients are referred to PAF by the ACS call center located in Austin, TX and by ACS affiliate chapters throughout the United States via telephone or through a dedicated secure web-based ACS patient referral portal.

During FY 2009/2010 PAF provided direct case management services to 4,483 patients through the ACS/PAF Partnership program. The top three issues of the patients referred to PAF through the ACS/PAF Partnership were:

- Uninsured Issues 33.42%
- Debt Crisis Issues 21.45%
- Insurance Issues 14.62%

Case managers in the Partnership were able to obtain debt relief for ACS patients during FY 2009/2010 in the amount of $9,117,368.15.

Additionally, another 3,193 patients who were referred by ACS were served through other PAF programs including both of the PAF/CDC Cooperative Agreement programs (SCUP and HemOne), the Virginia Cares for the Uninsured Program (VCUP) and the Med CareLine. We were pleased to provide direct case management services to 7,686 patients that were referred to PAF by ACS this fiscal year.

PAF presented two webinar training sessions to the national ACS Navigator Team, educating them to the services provided to patients by PAF and how we interface with ACS to ease the referral process for patients. In return, the ACS Navigator Team Supervisors presented a webinar educating the PAF team on ACS Services. Mary L. from Illinois who was assisted by the ACS/PAF Partnership writes:

“My PAF case manager became my advocate and friend. Your expertise, encouragement, dedication, and confidence, calmed my fears and helped me to develop patience to continue. This time, however, I had a partner, the Patient Advocate Foundation, who understood my frustrations and who had the knowledge, wisdom, and insight into how to deal with my situation. You and your organization were so helpful to me.

Thanks to your efforts, my billing issue was resolved to my complete satisfaction.”
PAF celebrated its sixth year of partnership with the Lance Armstrong Foundation (LAF) and the LAF LiveSTRONG SurvivorCare (LSSC) program in FY 2009/2010. National marketing and expansion of the LiveSTRONG project has remained and continues to be a high priority continuing in FY 2010/2011.

Program highlights include:

- PAF provided direct case management services to 3,029 patients referred by the LSSC program
- PAF continues to serve on the LSSC National Hispanic Outreach Advisory Board to assist with all aspects of the LSSC National Hispanic/Latino initiative
- LSSC partners continued collaboration monthly, sharing resources, program services, patient feedback and survey results, highlighting partner successes on behalf of patients who have been served through LSSC
- Implemented a warm call transfer option for LAF patients being referred from the LSSC call center directly to the PAF case management team
- PAF began to distribute LSSC brochures through the PAF national disparities outreach programs including our National African American Outreach Program and the National Hispanic/Latino Outreach Program

Since 2004, PAF has served 11,609 patients through the LSSC partnership.

A Patient assisted by PAF as a partner in the LSSC program said:

**Stephen Jebo**  
Brain Cancer  
Salina, KS

“The people we spoke with by phone were very helpful, interesting in our concerns and encouraging. PAF would follow up with us or we with them to get our issues resolved. When one is going through the labyrinth of cancer diagnosis, treatments, medications, appointments, bills and daily life, PAF was a lighthouse in the storm, a guide in the maze of confusion; your encouragement and compassion were invaluable.”
Direct Patient Services Division

In FY 2009/2010, PAF entered into a contractual partnership agreement with the Cancer Treatment Centers of America (CTCA) to provide sustained case management services to patients who are seeking care at CTCA medical facilities and are experiencing access to care issues. These include obstacles due to insurance issues, inability to afford their out-of-pocket expenses and/or travel related issues. Through the partnership, these clients are referred directly to PAF for assistance. The program has a dedicated 1-800 phone line, secure provider referral portal and dedicated case management staff.

The partnership was launched in March 2010 and through the first four months assisted 223 CTCA patients. The CTCA case management staff has been successful in obtaining $89,576 in medical debt relief since the program became operational.

In FY 2009/2010, PAF was featured by numerous tier one media outlets, including:

- Associated Press
- CNN
- The Wall Street Journal
- The Washington Post
- Marketwatch
- MSNBC
- AARP The Magazine
- MSN.com
- CBS News
- USA Today
- Smart Money Magazine
- Dateline NBC
- The New York Times
- The Hartford Courant
- Men’s Health Magazine

PAF was also featured in tier two media outlets and websites, magazines, trade publications and television making earned media coverage the third highest referral source in FY 2009/2010 at 11.96%. Additionally, referrals from patient’s friends, doctors, medical social workers, Cancer Care, many other Patient Advocacy Organizations, PAF’s Co-Pay Relief Program and patients previously served by PAF round out the top ten referral sources for FY 2009/2010.
Cancer continues to be the primary diagnosis of PAF patients with 72.07% of all patients served reporting a diagnosis of cancer, representing a 4.14% decrease from FY 2008/2009. Breast Cancer remained the leading cancer diagnosis again this year at 24.53%, but was an almost 12% decrease from last year. Colorectal Cancer was the second highest reported cancer at 20.05%, a 0.21% increase over last year. Male Reproductive System Cancers increased by almost 2% (from 10.77% in FY 2008/2009 to 12%) moving it to the third highest followed by Lung Cancer representing 11.28% of our patients. Brain Cancer increased almost 80% this year over last (6.22% vs. 3.44%) and Multiple Myeloma was a new cancer diagnosis being reported in the top ten cancers this year at 6.13%. Diagnoses of Female Reproductive Cancers (5.83%, an increase from 3.56%), Lymphoma (5.37%), and Leukemia (3.68%) round out the list with the addition of Kidney Cancer being reported by 4.91% of our patients, again a new cancer diagnosis to the top ten. Ovarian Cancer and Rectal Cancer which had been included last year were no longer one of the top ten cancer diagnosis reported by PAF patients in FY 2009/2010.
While cancer is the number one diagnosis of PAF patients, PAF is an inclusive advocacy organization and has provided direct patient support to people who have been diagnosed with various other chronic, life threatening and/or debilitating illnesses. The remainder of the top ten diagnoses of PAF patients for FY 2009/2010 includes Chronic/Debilitating Conditions of which there are over 60 (14.21%) an increase of 27% over last year, Auto Immune Diseases (5.98%), a 58% increase over last year, Cardiovascular Conditions (2.49%), Screening for Symptoms (1.91%), Nervous System Conditions (1.82%), Kidney Related Diseases (0.68%), Pediatric Conditions (0.64%), and Organ Transplantation (0.19%).

In FY 2009/2010, PAF completed the third year of a second five year cooperative agreement from the Department of Health and Human Services Centers for Disease Control and Prevention (CDC). The Hematologic Cancer Education and Outreach Program (HemOnc) is designed to assist in determining the effectiveness of current educational materials available for hematologic cancer patients, with a focus on individuals who may be underserved, uninsured or racial/ethnic minority, and to identify areas where there may be opportunities to collaborate with other partners to improve future publications. Lighting the Way, A Practical Guide to Clinical Trials, published in 2009, is being translated in Spanish this fiscal year. Additionally A Greater Understanding: Your Guide To Clinical Trials was written to compliment Lighting the Way.
During FY 2009/2010 PAF served a total of 1,296 blood cancer patients with an average of 324 patients served quarterly through the HemOnc program. This program includes a disparities outreach component, targeting African American and Hispanic/Latino hematologic cancer patients, and the organizations and healthcare facilities that serve those populations. States visited during this fiscal year include:

- Texas
- Utah
- Missouri
- Alabama
- Virginia
- Nevada
- Arizona
- Kansas
- Mississippi
- Iowa
- Maine
- California
- Florida

Outreach swings to specific states targeted Research Hospitals, clinics (both radiation and chemotherapy), physician’s offices, and community advocates to educate them. Members of the HemOnc staff attended the Association of Pediatric Hematology Oncology Nurses (APHON) conference, the National Comprehensive Cancer Network (NCCN) annual conference, Oncology Nursing Society (ONS) annual conference, Association of Oncology Social Workers conference, American Society of Clinical Oncologists (ASCO) conference and the American Society of Pediatric Hem/Onc (ASPHO) conference.

Of the 1,296 patients served under the Hem/Onc program in FY 2009/2010, 76.23% had some form of insurance. 40.46% served by PAF were covered by private insurance, 11.43% were covered by Medicaid and 23.03% were covered under Medicare. This data represents a 1.44% decrease in the Medicare patients and a 3.85% increase in Medicaid patients served this fiscal year versus last. These statistics also showed 23.77% of all PAF patients served through the HemOnc patients reported no insurance coverage for their healthcare needs.

Globally, in FY 2009/2010, 81.52% of the patients assisted had some form of insurance whether it be Commercial/Private Insurance (45.12%), Medicare (30.18%), a 23% increase over FY 2008/2009 or Medicaid (6.22%). The number of uninsured patients decreased by 21% (from 22.46% to 18.48%) during this fiscal year. The Virginia Cares Uninsured Program (VCUP) is a program that was implemented in 2007 and aims to assist uninsured or underinsured Virginians, through free sustained direct case management services, who have been diagnosed with a chronic, debilitating, or life-threatening illness and are experiencing access to health care issues.
During FY 2009/2010, VCUP successfully resolved 1,444 patient cases through direct arbitration, mediation, and negotiation by the VCUP case management staff. Recognizing the many issues that surround medical debt, the VCUP case management team was able to negotiate $1,552,885.60 worth of debt relief on behalf of Virginians served during FY 09/10. This debt relief was accomplished through negotiations with debt collectors, charitable contributions from state and local agencies, co-pay program assistance, and/or charity write-offs through medical facilities/doctor offices.

There are currently over a million residents that are uninsured throughout the state of Virginia, which makes the outreach component of this program vital to its success. VCUP staff members attend outreach events on a continuous basis incorporating health fairs, swings to health service agencies, and community events in an effort to promote the program and provide information to prospective Virginians that may benefit from VCUP offerings. From 07/01/2009 through 06/30/2010, the VCUP case management team attended 213 outreach events including:

- The Minority Health Coalition Free Clinic Day in Norfolk, VA
- The CBS sponsored Health Fair in Richmond, VA
- The 2010 National Rural Health Summit in Danville, VA

Additionally, VCUP launched a yearlong outreach and marketing campaign in June of 2010. This state-wide initiative will reach Virginians through radio announcements, billboard and newspaper advertisements and personal outreach visits by members of our case management team.

Two of the patients served by VCUP had this to say:

**L. Loer**
NORFOLK, VA

“We have had excellent experiences with your organization. They immediately go to work and in our case, stayed on the phone until everything was resolved. PAF has been a real help to us in this very difficult time.”

**Tracey Schwartz**
HAMPTON, VA

“I had exhausted myself in fighting this issue (not to mention the cancer, which is supposed to kill me within 6 months), and it was a tremendous comfort to me to know that someone else would pick up that burden on my behalf. Thank you so much. With this treatment, I fully intent to outlive my prognosis!!”
Patients contact PAF for assistance for a wide variety of issues and needs. These patients are assigned to the case manager that can best meet those needs and achieve resolution. In FY 2009/2010 the primary issues patients were seeking assistance with included Insurance Issues (60.70%), Uninsured Issues (16.51%) a decrease of 18%, Debt Crisis Issues (14.29%) an 11% increase over FY 2008/2009, Program Information Request (3.96%), Disability Issues (3.51%) and Employment Issues (1.03%). PAF patients requesting assistance with Insurance Issues included co-payment/premium/deductible assistance for both privately insured patients and those covered by Medicare Part D, general benefit questions, claims denied as not medically necessary, coding and billing errors, claims denied due to experimental/investigational, benefit exclusion, assistance with facilitating second opinion, questions on COBRA eligibility/enrollment/extension, Medicare Part D plan education/enrollment/coverage issues, and denied/off formulary.
Direct Patient Services Division

Patient Advocate Foundation has two specialized programs within Direct Patient Services that are designed to address specific needs to defined populations. These programs include the Med CareLine and the Co-Pay Relief (CPR) program.

In November 2006, PAF launched the Med CareLine Division, a patient/provider hotline, designed to provide sustained assistance to patients nationwide who have been diagnosed with a specific illness and are seeking educational resources, direct assistance with access to care issues, and/or financial aid for select patient needs. The launch of the Med CareLine division was the first time that Patient Advocate Foundation partnered clinical specialists with patients who were seeking access to emerging treatments and therapies.

The first program in the Med CareLine Division, the Colorectal CareLine (CCL) has been serving patients since 2006. We are pleased to report that FY 2009/2010 saw the Colorectal CareLine staff serving 2,562 patients with clinical case management services. Since the launch of CCL in November 2006, nearly 10,000 Colorectal Cancer Patients have accessed the CCL clinical case management services.

The Colorectal CareLine continues to administer the CCL Financial Aid Fund, a small grant program designed specifically for colorectal cancer patients in need of debt crisis assistance for expenses related to out of town care. The CCL Financial Aid Fund currently provides one-time grants to eligible patients who have a diagnosis of colorectal cancer and since inception has assisted 4,063 patients.

The Colorectal CareLine staff exhibited and/or presented at the Oncology Nursing Society (ONS) 35th Annual Conference in San Diego, CA, the American Society of Clinical Oncology (ASCO) 46th annual meeting in Chicago, IL, and at the Patient Advocate Foundation’s 11th Annual Patient Congress held in Washington, D.C. in the Educational Expo for all attendees. The Colorectal CareLine also provided program materials for the Colon Cancer Alliance Quarterly meetings in Philadelphia, PA, New York, NY, Tampa, FL and Salt Lake City, UT, and presented at a John Hopkins Weekly Luncheon.

CCL staff has been successful in bringing medical debt relief to the colorectal cancer patients we have served in the amount of $614,239.75 for FY 2009/2010. PAF has obtained $3,433,633.73 in total medical debt relief on behalf of colorectal cancer patients since the inception of the program. The Colorectal CareLine is supported by Amgen Oncology, sanofi-aventis and Genentech.

JAMES CANTRELL
Stage II Colon Cancer
Dyersburg, TN

“The medicine being available is a miracle since we had no way to purchase it. She gave us the advice on how to get gas and food. We were so desperate for care and so very glad we found you.”
In February 2010, PAF launched the Chemo-Induced Nausea and Vomiting (CINV) CareLine, the second program in the Med CareLine Division. In accordance with the mission of the Med Care Division, the CINV CareLine provides sustained clinical case management assistance to patients experiencing nausea and vomiting as a side effect of chemotherapy treatments. Referrals to the line are being provided by field representatives, generated by a national press release as well as PAF case management staff screening cancer patients for program eligibility. The program has a dedicated 1-800 phone line and website.

Since the program inception in February 2010, the team has assisted 27 patients suffering with CINV and has been successful in obtaining $36,350 in medical debt relief on behalf of these patients. The CINV CareLine is supported by ProStrakan.

Patient Advocate Foundation’s Co-Pay Relief (CPR) Program has successfully completed 6 years of operation and continues to be one of the two core competency based programs at PAF. The program was established in April 2004 to provide direct financial support to insured patients, to include Medicare beneficiaries, who qualify medically and financially with their pharmaceutical co-payments.

In FY 2009/2010, the CPR program expanded its patient support by opening one new disease fund, Cutaneous T-Cell Lymphoma as well as expanding the covered diagnoses in the Autoimmune Disorders silo, to include Ankylosing Spondylitis and Plaque Psoriasis. The Co-Pay Relief Program also was successful in expanding available funding through the generous donations of existing and new partners in the following established silos:

- Autoimmune Disorders
- Chemo Induced Anemia/
  Chemo Induced Neutropenia (CIA/CIN)
- Lung Cancer
- Multiple Myeloma
- Myelodysplastic Syndrome (MDS)
- Osteoporosis
- Prostate Cancer
- Rheumatoid Arthritis
- Lymphoma
- Malignant Brain Tumor
- Myelodysplastic Syndrome
- Multiple Myeloma
- Osteoporosis
- Pancreatic Cancer
- Prostate Cancer
- Rheumatoid Arthritis
- Sarcoma
- Cutaneous T-Cell Lymphoma

These additions expanded our available co-pay support disease categories to 20 in FY 2009/2010. The CPR program assisted patients with the following diagnoses during the past FY:
Direct Patient Services Division

FY 2009/2010 CPR patient impact and operational enhancements included:

- PAF’s CPR program served 11,161 patients this fiscal year, a 52.7% increase from FY08/09 when CPR served 7,310 patients. PAF saw a 96% increase in funding support this year over FY 2008/2009.
- The CPR Program has continued to be recognized as #1 across the United States by Practice Administrators for superior patient service and ease of program use.
- The CPR program successfully completed its annual program audit in January 2010 with no exceptions noted.
- The CPR program implemented an upgraded Automatic Call Distribution system (ACD) in November 2009. This technology enhancement has made a positive impact in the service that the CPR program provides to all callers. The system allows all calls to be completed upon initial contact with the program and provides continuous updated information to the patients and providers regarding the availability of each disease category.
- CPR expanded the financial eligibility guidelines for patients seeking assistance from the CPR program to 500% of the Federal Poverty Level (FPL) effective April 1, 2010. This significant program modification has made a positive impact in expanding the patient access to the CPR program. CPR successfully developed and deployed our own custom database solution in January 2010 which has significantly enhanced the efficiency of the CPR operations.
- As of June 2010, the CPR program now accepts applications through the secured provider/pharmacy portal – 24 Hours a Day – https://cprproviders.patientadvocate.org
- Created and widely distributed a quick reference guide that provides step by step instructions on how providers can complete the on line registration process for the secure CPR application portal as well as steps to use the portal to complete the patient application process.
- Deployed enhancements to the secure provider/pharmacy portal including functionality that allows providers to apply on behalf of multiple patients in one session, providing up to 48 hours to download and print the applications as is convenient, as well as a patient look up feature.
- Launched the “Monday Message” communication strategy to the thousands of providers and pharmacies registered with the CPR program providing up to date program availability information as well as program enhancements.

ALBA HALE
RHEUMATOID ARTHRITIS
MIAMI, FL

“This is the first time I have become a member of the Co-Pay Relief “family” and this far I can say I find this to be a very professional, organized foundation of which I am privileged to be a part of. In these uncertain times it is very helpful to find a group that is willing to provide hope and financial help to those who are eligible due to medical expenses and financial distress. Thank you for all your help.”
The CPR program has successfully completed 6 years of operations providing co-payment assistance to a total of 36,284 patients, awarding over $96 million in copayment assistance since inception, April 2004. Patient Advocate Foundation would like to thank the following donors for their sustained commitment and financial support of the Co-Pay Relief program in FY 2009/2010:

"The Patient Advocate Foundation was truly a blessing for me as a young, fifty year old woman. They were instrumental in acquiring all the proper documents to help me through this journey. It has been a trying time for me and my family. Thank you and God bless all of you!"
Each day, our professional staff members work with patients to achieve resolution to their issues. As demand continues to increase, the resources available continue to decrease, challenging our staff to be more creative and persistent when identifying resolutions to the issues our patients face. The economy is still playing a role in the lives of our patients as many of them lose insurance coverage due to their companies either dropping coverage or closing their doors. In spite of all of these obstacles, our team of professional case managers and call counselors has been successful in finding resolutions to our patient’s issues. In FY 2009/2010 the top category of resolutions achieved by our staff on behalf of the patients were Insurance Resolutions (62.71%), a 6% increase over last fiscal year. Insurance resolutions include obtaining co-payment, deductible and premium assistance for patients, educating on general benefits, obtaining charity care for the underinsured, mediating the appeals process, enrolling patients into Medicare and/or Medicaid, facilitating access to free drugs through manufacturer sponsored programs, resolving Medicare Part D coverage issues, and reconciling coding and billing errors.
Direct Patient Services Division

Debt Crisis Resolutions was the second largest category of resolutions (17.06%) moving from third last year, a 9% increase. Debt crisis resolutions on behalf of patients included transportation assistance, the offset of costs through alternative assistance, rental/mortgage payment relief, utility/phone relief, food assistance and locating needed medical supplies. Uninsured Resolutions accounted for 15.58% of the resolved cases followed by Disability Resolutions (3.62%) and Employment Resolutions (1.03%)

PAF was able to obtain a considerable amount of debt relief for patients in FY 2009/2010. The value of the reported debt relief equaled $17,550,386.64, a 40% increase over last year. It is important to note that it is likely that the financial impact our staff has on the lives of patients is far greater over time than presented here as this reported debt relief of $17 million is only the financial relief that is reported to case managers and/or recovered during the course of our work with an open case and does not capture long term impact. The debt relief breakdown is:

<table>
<thead>
<tr>
<th>Debt Crisis Resolutions</th>
<th>Amount Recovered</th>
<th>Write Off Amount</th>
<th>Charitable Contribution Received</th>
<th>Patient Amount</th>
<th>Provider Amount</th>
</tr>
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<td>$4,215,308.19</td>
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**Debt Crisis Resolutions**

- **Amount Recovered**: the amount PAF recovered from third party payers such as commercial insurance plans and Medicaid or Medicare programs.
- **Write Off Amount**: the amount of patient debt relief obtained by PAF through negotiations with facilities and/or medical providers.
- **Charitable Contributions**: the amount PAF secured on behalf of patients through utilization of national and/or local charitable resources such as hospital charity care programs, non-profit financial aid programs and/or local faith or disease based programs.
- **Patient Amount**: the amount directly returned to patients as a result of PAF negotiating reimbursement for out of pocket medical expenses.
- **Provider Amount**: the amount directly returned to providers as a result of PAF negotiating reimbursement for medical debt that had been previously written off or logged by the facility as “uncollected”.


Conclusions
While we are energized by the passage of sweeping healthcare reform, the Affordable Care Act (ACA) passed in 2010, we are equally concerned by the practical impact that the implementation of ACA will have on our nation’s most vulnerable populations which is yet to be well defined. PAF believes that our services will be depended upon even more in the coming years and we stand ready, committed to supporting those that cannot do it for themselves. Committed to the sister, brother, mother, father, grandmother, grandfather, aunt, uncle, daughter, son, or friend who is faced with a life threatening diagnosis and is simultaneously burdened with inadequate access to and coverage for their care. We will remain a trusted source in patient advocacy, available and ready to help patients solve their insurance and healthcare access problems as we have been doing since 1996. It is our commitment and responsibility to the nation.

Joel Perry
Non-Alcoholic Cirrhosis
Jacksonville, FL

“Exceptional! Marty is a wealth of information and resources. She facilitated conversations with multiple pharmaceutical companies - enabling these companies to pick-up most of the Rx costs - which with a transplant it is upwards of 1,000.00 per month. She is caring and concerned, so very willing to listen understand, and suggests solutions. She is a gift to us!”

Elsa Tanner
Breast Cancer
Lawrenceville, GA

“Judith Storey was wonderful in helping me get my disability and keeping my medical insurance. She fought to me when I didn’t have the strength to fight. She was my advocate!”
PAF obtained debt relief valued at $17.5 million dollars for PAF patients through negotiated write offs, charity care access and coding/billing error resolutions.
Patient Advocate Foundation entered a second decade of hosting its Annual Patient Congress in Washington, DC this year. The 11th Annual Patient Congress was held on June 29-30, 2010 and attracted more than 150 patients, family member advocates, physicians, nurses and social workers – representing all 50 states and the District of Columbia. There was a heightened enthusiasm this year as the historic Patient Protection and Affordable Care Act legislation had passed in Congress in March 2010. Attendees learned how to use their voice to continue to educate legislators on what the patient experience is in the health care system and how the new legislation would provide benefits to those patients.

Patient Congress attendees participated a Capitol Hill briefing where they heard from a panel consisting of:

- Elizabeth Fowler, JD, PhD-Senior Counsel to the Chair and Chief Health Counsel, Senate Finance Committee
- Debbie Curtis-Chief of Staff to Congressman Pete Stark (D-13th-CA)
- Chuck Clapton, JD-Health Policy Director, Senate Health, Education, Labor and Pensions Committee
- Mark Hayes, JD, PharmD-Health Policy Director and Chief Health Counsel, Senate Finance Committee for Ranking Member Senator Charles Grassley (R-IA)
Christopher Kush, MPP, CEO of Soapbox Consulting instructed attendees on how to have an effective Hill Visit and educated the attendees on the main issues for discussion with the elected officials. The issues included:

- A permanent solution to the Medicare physician reimbursement formula
- Support for the “Medical Bankruptcy Fairness Act” and the “Health Insurance Rate Authority Act”
- To provide a comprehensive definition of out-of-pocket spending within the newly created Health Insurance Exchanges

“My son and I had a wonderful time attending the 11th annual Patient Congress. It gave us an empowered feeling to be gathered with others, working toward the same goal of achieving better attention to the plight of the serious and/or chronically ill.”
Attendees visit with our exhibitors during the Welcome Reception and Educational Expo.

That evening, attendees had the opportunity to attend a Welcome Reception and Educational Expo. Representatives from the patient advocacy community and representatives from voluntary health care organizations and agencies were available to visit with attendees and to provide educational information.

Exhibitors included:

- American Psychological Association
- American Society of Therapeutic Radiation Oncology (ASTRO)
- Breast Cancer Network of Strength
- BreastCancer Trials.org
- C3: Colorectal Cancer Coalition
- Cancer Support Community
- Colon Cancer Alliance
- Colorectal CareLine
- Co-Pay Relief Program
- Imerman Angels
- International Myeloma Foundation
- Kidney Cancer Association
- Lance Armstrong Foundation
- Legal Information Network for Cancer (LINC)
- Lung Cancer Alliance
- Men’s Health Network
- National Alliance for Hispanic Health
- National Cervical Cancer Coalition
- National Coalition for Cancer Survivorship
- National Patient Advocate Foundation
- Oncology Nursing Society
- Ovarian Cancer National Alliance
- Pancreatic Cancer Action Network
- Patient Advocate Foundation
- Prevent Cancer Foundation
- Sarah Lawrence College Health Advocacy Program
- The Cholangiocarcinoma Foundation
- Walden University – College of Health Services
- Woman and Cancer Magazine

Senator Max Baucus (D-MT) with Nancy Davenport-Ennis, PAF CEO and fellow attendees.

The Honorable John Yarmuth (D-3rd-KY) and Patient Congress Attendee and constituent Nicholas Harper discuss the newly passed Affordable Care Act.
On day two of the conference, Patient Congress participants, prepared by the Capitol Hill Briefing, conducted personal visits with their Members of Congress from both the US House of Representatives and the US Senate. The Patient Congress attendees completed 189 meetings with Members of Congress and staff on Capitol Hill, including 100 Senate offices and 89 House offices. Seventy-five of the meetings were with the member themselves.

During the Dinner Symposium held Thursday evening, the Honorable Joe Courtney (D-2nd-CT), United States House of Representatives and the Honorable Allyson Schwartz (D-13th-PA), United States House of Representatives were presented with the 2010 Healthcare Hero Award for their steadfast commitment to the Affordable Care Act. We also recognized the American Cancer Society and the American Cancer Society Cancer Action Network with The National Humanitarian Healthcare Award, the highest award presented by PAF/NPAF to an individual or organization.

A highlight of this year’s Patient Congress Dinner Symposium was the opportunity for participants to hear from our Keynote speaker, Victoria Reggie Kennedy, wife of the late Senator Edward M. Kennedy. In her address, Mrs. Kennedy recounted how her husband worked diligently throughout his career on healthcare and how important it was to see it pass. Prior to the Dinner, Mrs. Kennedy autographed copies of the Senator Kennedy’s last book, “True Compass” for all of our attendees. Her story of his life left an our attendees inspired and energized to continue to make a difference.
A special thanks to the Members of the United States Congress who served as Honorary Chairs for the 11th Annual Patient Congress.

Patient Congress Honorary Chairs:

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Senator Arlen Specter (D-PA)
Senator Ben Cardin (D-MD)
Senator Ben Nelson (D-NE)
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Senator Richard Burr (R-NC)

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Senator Tim Johnson (D-SD)

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“It is one thing to work to affect change writing letters, making phone calls and signing petitions – but to work to make positive change face-to-face…that is an experience everyone should have.”
The PAF Scholarships for Survivor’s Academic Award Program, founded in 2000 in honor and memory of the thousands of young adults that have had their childhoods forever changed by a diagnosis of cancer or another life threatening disease, had the distinct pleasure of honoring the recipients for the 2010-2011 Academic school year at the 11th Annual Patient Congress held in June. This year, Patient Advocate Foundation recognized Abby Schafer who completed her course of study and graduated from Marywood University with a Master’s of Science in Social Work.

“I am not sure what the future holds for me yet...Regardless of what is in store for me I am certain I will give it my all and be able to put my education to good use. I am grateful for the opportunity and knowledge I have gained throughout pursuing this degree. I am grateful to you all for the work you do that has provided me with the gift of this scholarship. Thanks to you all at the Patient Advocate for helping me reach my goal and now to allow me to be able to set new ones.”

Abby Schafer,
Graduating Senior,
Scholarship for Survivor’s recipient

Each student receives a $3,000 scholarship annually for each year that he/she is enrolled full time in a higher education program, maintains a GPA of 3.0 or higher and completes community service hours each semester. The Scholarship for Survivors program will provide $33,000.00 in scholarship funds for 2010-2011.
The PAF Co-Pay Relief Program has served more than 36,000 patients and provided more than $96 million dollars in direct copayment assistance, insuring access to more than $500 million dollars worth of life-saving pharmaceutical agents.
“I Love Beach Music” was just one of the melodies played at the 9th Annual A Promise of Hope Affair as we chased away the winter blues with a Mid-Winter Beach Party! A Promise of Hope Affair was held on February 27, 2010 at the Newport News Marriott at City Center. Our guests, totaling 350, arrived dressed as if for an evening at the beach or on their favorite cruise ship and included the PAF Executive, Scientific and Honorary Boards of Directors, local businesses PAF staff members and Partners in Progress ——representatives.

Joe’s Trop Rockers, consisting of Joe Maniscalo, Margarita Bill and Sherri Linn entertained our guests during our Welcome Reception putting everyone in the mood with their calypso/steel drum music. During the VIP Reception, our guests were entertained by Evening Violet, which included Becca Fifelski and Tim Tessier who provided acoustical guitar and vocal entertainment.

Our Silent Auction had over 400 items with a fair market value of over $57,000.00. Juliet Bickford, news reporter from PAF’s local CBS affiliate, WTKR-Channel 3, served as Mistress of Ceremonies and helped us raise $10,000.00 for PAF’s Scholarship for Survivors program that night.
As our guests entered the Ballroom, they were entertained by The Embers, one of North Carolina’s premier beach music bands. As an extra treat, members of the local shag dancing club, Shag N 4 U, lead by Larry and Cindy Black took over the dance floor in an exhibition of shag dancing to the sounds of The Embers. During dinner, our guests heard from Dr. John McCarty, Professor of Medicine Hematology/Oncology at VCU-Massey Cancer Center and the Medical Director of the Bone Marrow Transplantation Program at VCU Medical Center. He shared with our guests about a patient that PAF had assisted with getting a transplant case denial overturned by one of our case managers.

PAF also recognized Larri Short, our regulatory attorney who is with Arent Fox LLP in Washington DC. She was presented with the National Humanitarian Healthcare Award in recognition of her outstanding leadership and commitment to improving access to quality healthcare as a national authority in regulatory affairs. This is the highest award that PAF presents to individuals who are making a difference.

We were honored to be addressed by Congressman Robert C. “Bobby” Scott (D-3rd-VA) and Congressman Rob Wittman (R-1st-VA). Also in attendance were Virginia House of Delegates members Delegate Robin Abbott (D-93rd) and Delegate Glenn Oder (R-94th) as well as Charles Stanton from U.S Senator Jim Webb’s office (D-VA).

Through the support of local businesses, PAF Board of Directors and Partners in Progress, the 2010 A Promise of Hope Affair was able to raise over $286,000.00 through donations, sponsorships, auction bids and in-kind donations. These funds support PAF’s provision of direct services by our professional case management staff to help patients solve their insurance and healthcare access problems.
9th Annual A Promise of Hope Affair

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**Victoria Moore**

*Breast Cancer*  
*Los Angeles, CA*

“Ms. Martinez was very helpful and professional, she made me feel supported and more secure by offering extra resources that they have available. I appreciate their compassion and empathy during a very challenging time.”
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Ankylosing Spondylitis
Port Charlotte-FL

“I have had a multitude of health issues since I was 17 years of age. It started with Ulcerative Colitis. Then at 45 I developed Asthma, then pneumonia. In 2006, was diagnosed with IgA Nephropathy, this caused high blood pressure, high cholesterol and gout, in addition to RLS. I am now on Coumadin now, but hope it’s temporary. My latest disease is Ankylosing Spondylitis has really hit hard. I was able to stay ok with the financial debt with all my specialists and all my Rx, but some months are worse than others. My co-pay had to go onto a charge card-and also with the maintenance program every eight weeks after and then the doctor visits to take the injection adds that much more expense. The day I found out that there are medical grants to help people like me, it really gave me hope-my family and I need that. I am a very giving person and I thank god every day, so I thank you very much.”
PAF completed its 14th year of operations with revenues in excess of $35.6 million dollars, a 39% growth in revenues from the prior FY. $0.91 of every dollar donated supports a direct patient service program offered by PAF.
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- Beth Patterson
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- Calsonic Kansei
- Candace Sona
- Candis Windsor
- Cara Miller
- Carey Waldrip
- Carlette Hattett
- Carly Coleman
- Carolyn Andrews
- Chad Berg
- Chaela Exum
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- Donna Haraburda
- Doral Dunn
- Dornetta Newland
- Doug Favre
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- Edda Colon
- Edna Tillman
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- Elena Ganenko
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- Janice Thompson
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Kristin Goforth
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Laurel Gregory
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Lee Mortenson
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Roxanne Barba
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Ruth Anne Reed
Sally Blanchard
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Samantha Kumar
Sandra McAllister
Sandra Scott
Sarah Lane
Sarah Lewis
Scott Foraker
Scott Wasserman
Serena W. Anderson
ShaCole Simmons
Shauna Hatfield
Shelby Cornick
Sherri Walker
Sheryl A. Jacobs
Staica Foreman
Staples Center Foundation
Stephanie Bland
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Stephen Hill
Steve W Young
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Tina Santiago
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Tomas Mustelin
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Tracy Andrus
Tricia Smithers
Trisha Cochran
United Way of the Virginia Peninsula
Vanessa Toro

Vicki Huxford
Victor Fung
Victoria Doheny
Viola Jackson
Ward Bailey
Whitney Thornton
Willie Lovett
Yashia Clarke
Yvonne Perlberg

In Honor of:

In Honor of Bob Keintz
Beth D’Addono

In Honor of Clayton Keenan
Tandy Keenan

In Honor of Christian Downs
Pearl B. Moore

In Honor of Greg Pemberton
Tom Jones, Louretta Palmer

In Honor of Hannah Bystrom
Thomas Lawson

In Honor of Katie Schools
Chris & Susan Schools

In Honor of Richard (Rick) Crusoe
Libby Taub, Ruth Taub

In Honor of Tammy Neice
Joshua Marshall

In Memory of:

In Memory of Andrew Aaron
Annalee Mauskopf

In Memory of Anne Brosnan
James J. McMahon

In Memory of Arthur H. Phillips
Calsonic Kansei
Julie Nichols

In Memory of Bernard Clark
Ronald A. Vandenbussche

In Memory of Beverly Ingham
Vernon Ingham

In Memory of Binks Hollowy
Martha Smith

In Memory of Carol Casale
George Armitage

In Memory of Delores Jean Wagers
John T. Bickel, Sr.
George Pugh

In Memory of Donald A. Townsley
Jane Siano

In Memory of Donna Marie Shepherd
M. Craig Shepherd

In Memory of Evelyn Hurt
William Hurt

In Memory of Glynn Crowder
Julie Nichols

In Memory of Grace Box
Ronald Box

In Memory of James Michael “Mike” Stone
Chris Alstrin
Costanza Agency, Inc.
David Collins
Jean C. Shipman
William Shipman

In Memory of Jeanette Whiteley
David Whiteley

In Memory of John Hickman
Calsonic Kansei

In Memory of Karen Johnson
Emma Battle

In Memory of Larry Pint
Inge Aldersebaes
Scott and Vicki Brandau
Monika Davis
Jean Evers
Dennis and Christine Fannin
Home Trust & Savings Bank
Connie and Steven Jensen
Kolbet Realtors
Larry and Nancy Muller
Jim and Beth Olsen
Dee Onken
Lori Stern
Geri Thompson
Yvonne Tourtellott
Michael and Ruth Wagner

In Memory of Michael J. Rawski
Karleen Rawski

In Memory of Margret Ostrowski
Robert & Edward Spiegel

In Memory of Marshall Howland
Karen Howland
## PAF Supporters

- In Memory of Mom
  - Gary Brewer
- In Memory of
  - Morris Arthur Abrams
  - Clarice Rifkin Aronowitz
- In Memory of Onelia Trujillo
  - Joseph & Rita Alcure
  - Robert Bourque
  - Janet Flores
- In Memory of Rick Crusoe
  - Debbie Crusoe
- In Memory of Robert T. Griffith
  - Jacqueline Griffith
- In Memory of Robert W. Keintz
  - Adrienne Gallagher
  - Brenner Accounting Services
  - Mary Ann & John Moore
  - Mr. & Mrs. D. L. Wolle
- In Memory of Steven
  - Herb & Darlene Perry
- In Memory of Wayne Burrows
  - Gary Bauer

## PAF In Kind Supporters

- Leah Locke-Arnett
- Bruce Avery
- Dr. Alan J. Balch
- Dr. Charles Balch
- Dr. Pamela S. Becker
- Dr. Al Benson III
- Justin Boykin
- Bruce Breeger
- Dr. David Brizel
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- Dawn Rose-Hicks, Multi-Tek, LLC
- Michael Hippchen, Intelligent Decisions, Inc.
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- Deborah Parham Hopson
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- Dr. William T. "Bill" McGivney
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- Jennifer Stuebbe
- Andy Tao, AJTSport Photo
- Mark Trinkle, SignMedia, Inc.
- Dr. Reed V. Tuckson
- Dr. Lori Williams
- Somer Wilson
- Nancy Witte
- Randy Yocum

## Combined Federal Campaign

PAF is a participant in the Combined Federal Campaign (CFC) which was established by the United States government as a way for Federal employees to support their charities of choice though the use of payroll deduction. PAF’s CFC number is 10681. You are also able to designate Patient Advocate Foundation with your United Way campaign. Ask your United Way representative on the correct procedure to designate PAF as it may vary from United Way to United Way.

## PAF staff distributed more than 125,000 pieces of educational materials to patients, caregivers and healthcare professionals this year.
PAF Financial Statements

Patient Advocate Foundation

Statements of Financial Position

<table>
<thead>
<tr>
<th>June 30,</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>General operating cash and cash equivalents</td>
<td>$2,688,952</td>
<td>$2,804,701</td>
</tr>
<tr>
<td>Restricted CPR cash and cash equivalents</td>
<td>30,234,822</td>
<td>20,579,341</td>
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<tr>
<td>Unconditional promises to give</td>
<td>120,611</td>
<td>45,325</td>
</tr>
<tr>
<td>Interest receivable</td>
<td>70,656</td>
<td>73,050</td>
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<tr>
<td>Service contract receivable</td>
<td>240,629</td>
<td>116,074</td>
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<tr>
<td>Employee travel advances</td>
<td>1,088</td>
<td>-</td>
</tr>
<tr>
<td>Inventories</td>
<td>69,359</td>
<td>76,237</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>260,049</td>
<td>75,867</td>
</tr>
<tr>
<td>Investments and cash equivalents</td>
<td>1,974,377</td>
<td>1,975,136</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>35,660,543</td>
<td>25,745,731</td>
</tr>
<tr>
<td>Property and equipment - net</td>
<td>1,178,231</td>
<td>895,208</td>
</tr>
<tr>
<td><strong>Other assets</strong></td>
<td>114,374</td>
<td>15,463</td>
</tr>
<tr>
<td>Refundable deposits</td>
<td>36,953,148</td>
<td>26,656,402</td>
</tr>
<tr>
<td><strong>Liabilities and Net Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current portion of obligation under capital lease</td>
<td>$63,379</td>
<td>$58,660</td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>494,944</td>
<td>360,238</td>
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<tr>
<td>Deferred revenue</td>
<td>2,407,856</td>
<td>1,957,297</td>
</tr>
<tr>
<td>Accrued vacation leave</td>
<td>378,951</td>
<td>313,508</td>
</tr>
<tr>
<td><strong>Total current liabilities</strong></td>
<td>3,345,130</td>
<td>2,689,703</td>
</tr>
<tr>
<td>Long-term liabilities</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obligation under capital lease - less current portion</td>
<td>123,427</td>
<td>186,805</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td>3,468,557</td>
<td>2,876,508</td>
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<tr>
<td>Unrestricted</td>
<td>1,275,392</td>
<td>1,225,417</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>30,234,822</td>
<td>20,579,341</td>
</tr>
<tr>
<td>Permanently restricted</td>
<td>1,974,377</td>
<td>1,975,136</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>33,484,591</td>
<td>23,779,894</td>
</tr>
<tr>
<td></td>
<td>$36,953,148</td>
<td>$26,656,402</td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of these financial statements.
### Patient Advocate Foundation

#### Statements of Activities

<table>
<thead>
<tr>
<th>Years Ended June 30,</th>
<th>2010</th>
<th>2009</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Unrestricted</td>
<td>Temporarily Restricted</td>
</tr>
<tr>
<td><strong>Revenues, gains and other support</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants</td>
<td>$4,676,771</td>
<td>$23,153,996</td>
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<tr>
<td>Private and public donations</td>
<td>107,085</td>
<td>-</td>
</tr>
<tr>
<td>Donated services and materials</td>
<td>505,819</td>
<td>-</td>
</tr>
<tr>
<td>Program Administration</td>
<td>6,192,045</td>
<td>-</td>
</tr>
<tr>
<td>Patient Congress</td>
<td>207,300</td>
<td>-</td>
</tr>
<tr>
<td>Promise of Hope</td>
<td>231,450</td>
<td>-</td>
</tr>
<tr>
<td>Miscellaneous income</td>
<td>204,224</td>
<td>-</td>
</tr>
<tr>
<td>Investment income (loss)</td>
<td>304,091</td>
<td>-</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Satisfaction of program restrictions:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial Aid Awards</td>
<td>13,498,515</td>
<td>(13,498,515)</td>
</tr>
<tr>
<td><strong>Total revenues, gains and other support</strong></td>
<td>25,927,300</td>
<td>9,655,481</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program services</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient services</td>
<td>5,912,931</td>
<td>-</td>
</tr>
<tr>
<td>Co-Pay Relief</td>
<td>16,190,409</td>
<td>-</td>
</tr>
<tr>
<td>Service contracts</td>
<td>1,492,920</td>
<td>-</td>
</tr>
<tr>
<td>Supporting services:</td>
<td></td>
<td></td>
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<tr>
<td>Management and general</td>
<td>1,355,571</td>
<td>-</td>
</tr>
<tr>
<td>Fundraising</td>
<td>925,494</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total expenses</strong></td>
<td>25,877,325</td>
<td>-</td>
</tr>
<tr>
<td><strong>Change in net assets</strong></td>
<td>49,975</td>
<td>9,655,481</td>
</tr>
<tr>
<td><strong>Net assets - beginning of year</strong></td>
<td>1,225,417</td>
<td>20,579,341</td>
</tr>
<tr>
<td><strong>Net assets - end of year</strong></td>
<td>$1,275,392</td>
<td>$30,234,822</td>
</tr>
</tbody>
</table>

The accompanying notes are an integral part of these financial statements.
Revenues

- Program Grants 79%
- Management & General 5%
  $1,355,571.00
- Fundraising 4%
  $825,494.00
- Event Revenue 1%
- Interest
- Gifts & Contributions 1%
- In-Kind Service 1%

Functional Expenses

- Program Services 91%
  $23,596,260.00
- Advocacy & Government Relations 2%
  $528,235.00
- Service Contracts 6%
  $1,487,325.00
- Case Management, Outreach & Education Programs 24%
  $5,652,291.00
- Combined Program Services Expenses

Combined Program Services Expenses

- Financial Aid Grants & Administration 68%
  $15,954,409.00

FY2009/2010
PATIENT ADVOCATE FOUNDATION | ANNUAL REPORT 2009-2010

PAF STAFF FY 2009/2010

EXECUTIVE LEADERSHIP
Nancy Davenport-Ennis, Chief Executive Officer
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Beth Darnley, President, Mission Delivery
William Nason, Chief Operating Officer

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Judi Roberson Diana Hauser
Mary Tilles Deborah Andrus

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Jennifer Weese
Tricia Smithers

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Alan Richardson, Chief Development
Operations Officer
Thomas McCarty, Director, Corporate Development
Jonathan Sands, Executive Vice President of National Accounts

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Maxwell Adewusi   Vicki Huxford
Stacia Foreman Eboni Tynes
Diane Pfeifer

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Ruth Anne Reed
Marie St. Clair

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Edwin Anderson    Kevin Cox
Victoria Doheny  Gregory Foster
Elena Ganeko  Jason Green
Alan Kapadia James Kitzmiller
Bryce Lohr Russ Stewart

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Erin Moaratty, Chief of External Communications
Tina Rudolph-Smith - Director, Technology Coordination and Implementation

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Shauna Hatfield Vonya Journiette
Donna Adkins Lisa Kelley
Carolyn Andrews, LPN Tami Lewis, RN
Jacqueline Beard Michelle Lira
Brendan Bietry DeVaris Locket
Deirdre Cappe Leigh Loyd
Marisol Cardona-Ortiz Sandra McAllister
Liz Cary Danna Mobley
Michael Cernigliaro Tammy Neice, RN
Roshunda Chapman Jennifer Obenchain
Yashia Clarke Gayle Petrick
Shelby Cornick Nicole Robinson
LaQuita Durity Ambre Schima
Cynthia Espenshade Michelle Shanks
Erika Ibarra Deb Smith-Porter
Wanda Febus Martha Smith
Jane Garfield Candace Sona
Lakendra Green Judith Storey
Laurel Gregory Francisco Villegas
Margie Griffin Tanya Walker, RN
Cheryl Grizzle Morris Jamilla Williams
Donna Haraburda Patricia Witherspoon
Michelle Herbert Lisa Wright
Courtney Jones Patricia Jones

Lisa Woods
Stage I Breast Cancer
Philadelphia, PA

“My experience was overwhelmingly positive. My case manager, Laurel Gregory, was responsive, reactive and receptive. During my worst health crisis, I found PAF to be just what the doctor ordered. Thank you!”
**PAF STAFF FY 2009/2010**

**Co-Pay Relief Program**

Pam Cleck, Director  
Beverly McNearly-DaRavalliere, Assistant Director  
Mary Altomare  
Tracy Andrus  
John Barrino  
Milagros Blanco  
Stephanie Bland  
LaToya Blizzard  
Jackie Bruckheimer  
Tatiana Carter  
Carly Coleman  
Cynthia Edwards  
Laura Evans  
Chaela Exum  
Melissa Fairbanks  
Jennifer Fernaays  
Ellen Gillard  
Ashley Gilliam  
Kristin Goforth  
Joyce Grimes  
Viola Jackson  
Angela Johnson  
Tracie Karafa

Tara Girard, Director  
Mary Ellen Fleeger, Assistant Director  
Johnnie Burke, III  
Megan Bradshaw  
Rebecca Edmondson  
Amanda Hooten  
Danielle Jackson  
Sarah Lane  
Towana McKinney  
Amber Mitchell  
Deborah Monelly  
Tanna Palmer  
Nanette Roos

**Med CareLine Program**

Fredna K. Bailey, RN  
Carlette Hattet  
Kenneth Jacobs

Elaine Martinez  
Cheryl Nowell  
Patricia Turner

---

**Johnny Jones**  
Stage III Prostate Cancer  
Bartow, FL

“I never thought that I would be writing a letter like this to anyone that shows you how one day you can be up and the next day down. When my doctor informed me that I had prostate cancer, I knew my life was over. Little did I know that there were wonderful people like Michelle Herbert who reach out to people like me in my time of need, also I would like to thank all of the other hard working people at PAF.”

---

**Barbara Swanson**  
Chemotherapy Induced Anemia/Chemotherapy Induced Neutropenia  
Sun Lakes, AZ

“Thank you so much for the grant to help with my chemotherapy treatments. Your assistance will make it possible for me to have some savings left to live on when my treatment is completed and my ovarian cancer is in remission. I am hoping it will be before the start of 2010 so I can start the year fresh. I am working to remain active with a little golf and swimming. Soon the hot Arizona Summer will be over so more activity will be possible. Once again, I am very grateful for your assistance.”
PAF Staff completed 634 outreach and education events this year, reaching more than 415,000 people nationwide. Distributing more than 125,000 pieces of educational materials.
Acknowledgements

Editor-In-Chief  
Nancy Davenport-Ennis, Founder & Chief Executive Officer

Editors/Writers  
Fran Castellow, MSEd., President, Operations  
Alan Richardson, Chief Development Operations Officer

Contributors  
Beth Darnley, President, Mission Delivery  
Pat Jolley, RN, Chief of Patient Services  
Erin Moaratty, Chief of External Affairs  
Dynelle Lunsford, Chief Financial Officer  
Jamilla Williams, Director, Case Management  
Pam Cleck, Director, Co-Pay Relief Program  
Carolyn Andrews, Program Director, National African American Outreach Program  
Wanda Febus, Program Director, National Hispanic/Latino Outreach Program  
Margie Griffin, Program Director, Senior Services  
Jackie Beard, Program Director, Virginia Cares for the Uninsured Program  
Courtney Jones, Program Director, LIVESTRONG™ Partnership Program  
Gayle Petrick, Program Director, American Cancer Society Partnership Program  
Michelle Shanks, Program Director, PAF/CDC Cancer Prevention and Survivorship Partnership  
Tami Lewis, RN, CCM, Program Director PAF/CDC Hematologic Cancer Education & Outreach Program  
Liz Carey, Data Analyst
Save the Date

10th Annual
*A Promise of Hope Affair*
February 26, 2011
Newport News Marriott at City Center
Newport News, Virginia

“A Night at the Oscars™”
www.promiseofhope.net

12th Annual
Patient Congress
June, 2011
Washington, DC
www.pc.patientadvocate.org

2011-2012
Scholarship for Survivors
Application Deadline: April 12, 2011
www.patientadvocate.org
Listed Under “Programs” Section
Mission Statement

Patient Advocate Foundation is a national non-profit organization that serves as an active liaison between the patient and their insurer, employer and/or creditors to resolve insurance, job retention and/or debt crisis matters relative to their diagnosis through case managers, doctors and attorneys. Patient Advocate Foundation seeks to safeguard patients through effective mediation assuring access to care, maintenance of employment and preservation of their financial stability.