try to stop one heart from breaking...
one patient at a time

ANNUAL REPORT
2013-2014

Patient Advocate Foundation
Solving Insurance and Healthcare Access Problems | since 1996
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.

Patient Advocate Foundation has been helping patients solve their insurance and health access problems through our Direct Patient Services Division for over 18 years. During its first year of operations, PAF assisted 157 patients in a 10x10 foot warehouse space. In FY 2013/2014, PAF assisted 88,150 patients in an over 37,000 square foot national headquarters located in Hampton, Virginia and by staff located in Iowa, Florida, California and Texas. Services are provided by our professional case management staff, the Co-Pay Relief (CPR) staff and the MedCareLine 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.
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More than a century ago, Emily Dickinson scripted a poem that still resonates profoundly with anyone who works in the service of others. Only seven lines long, it reads:

If I can stop one heart from breaking,
   I shall not live in vain;
If I can ease one life the aching,
   Or cool one pain,
Or help one fainting robin
   Unto his nest again,
   I shall not live in vain.

These words embody the work of the Patient Advocate Foundation. Our dedicated staff commits themselves daily to easing the suffering of patients who are struggling to get access to or afford necessary care. This year’s annual report contains a poignant piece of artwork that represents the diverse mosaic of Americans we reach and serves as the symbol for our work to “Try to Stop One Heart from Breaking.” This painting by Kasey Carneal takes Dickinson’s message one step further and challenges us to take action now.

PAF provides hope and help one patient at a time. We have now served roughly 700,000 patients with direct support since our inception in 1996. Our Legacy Campaign goal is to stop our millionth heart from breaking by 2016.

The 2013/2014 Annual Report reveals a collection of compelling data representing tangible influence on the American patient population. In this past year, our Patient Services Division directly impacted 88,150 patients and made over 1.1 million contacts with various stakeholders vital in resolving patients cases and issues. PAF has consistently dedicated itself to assisting underserved and financially challenged populations. In the past year, for instance, 64 percent of the patients PAF served earned less than $23,000, and just over 80 percent had an income below $35,000.

In the past 12 months, the Patient Advocate Foundation’s Co-Pay Relief program – which is celebrating its 10-year anniversary in 2014 – allocated more than $32.6 million in direct patient assistance, a $3 million increase since last year. The money went directly to 20,835 qualified patients. The program has now mobilized more than $200 million in medical and financial assistance, touching over 126,000 lives since 2004.
The report also highlights key programs and services, made possible by the generosity of our donors. Their support enables our passionate staff to find unique solutions to complex financial, logistical, and administrative problems faced by our patients. We demonstrate our appreciation for any donation, no matter how big or small, through our commitment to the fiscal stewardship of those gifts. Of every dollar raised, 94.6%, or almost 95 cents, goes to support a program that will directly impact a patient.

At PAF, we will continue to be driven by purpose and sustained by passion to bring practical support to patients who are struggling. Thanks for your past and future support as we continue to help those who need it most.

Alan J. Balch, PhD
Chief Executive Officer

Dennis E.
Missouri
Metastatic Prostate Cancer

The PAF Co-Pay Relief program has provided financial assistance to me for a very expensive drug. This drug is extending my life because I have Stage IV prostate cancer with no known cure. This will let me enjoy my family especially my two grandchildren a little longer than I had expected. I am so thankful to PAF for their help to me so I can afford this drug.
As we look back upon another successful year at the Patient Advocate Foundation, we must take pause to consider the past, and marvel at the path ahead. Nineteen years ago, PAF was simply an idea based on the tragic experience of one woman who struggled to gain access to the care she needed and those who rallied to her side to help. Our organization was founded as a means to deliver one of life’s most important gift – access to health care – to those most in need. One patient at a time, and one powerful story at a time, we fight to make that difference.

Our singular mission is now a beacon of hope for hundreds of thousands of patients. As PAF continues to grow, our goals remain steadfast: to address crises of access, coverage, and medical debt. We have served roughly 700,000 patients to date over our nearly 18 year history, and have impacted the lives of countless more.

Direct patient support is and will always be the heart and soul of the organization. We serve the patients who reach out to us for help with a level of compassion and dedication worthy of the name “patient advocate.” We are incredibly proud of the work PAF accomplishes every day. Our motivation, as always, is inspired by patients and driven by the need to help people in ways that are both practical and meaningful. As you read through this report, we hope you will share our excitement and pride in all that the PAF does in the pursuit of our mission.

Sincerely,

F. Marc Stewart, MD
Board President
Daily, it is a profound privilege for Patient Advocate Foundation’s professional staff to serve those in crisis confronting healthcare access and reimbursement issues. The issues are complex demanding multiple contacts with stakeholders by PAF personnel to achieve favorable resolutions. Each case is handled with immediacy and sensitivity, resulting in favorable outcomes for seemingly impossible issues.

The remarks herein by our Board President, Dr. Marc Stewart and our CEO, Alan Balch, capture our services to those in need for this Annual Report. Their remarks also illustrate the sensitivity and capability of our leaders at both the Board and staff levels to deliver our mission to people in America. Since 1996, our mission has been to “try to stop one heart from breaking” and through the passion and commitment of our Executive Board of Directors, Scientific Committee, Alan Balch, CEO and the executive leadership and staff of PAF, that mission lives on. Through your support of our programs, you also have joined us in our campaign to “stop one heart from breaking” for which we thank you.

With sincere gratitude,

Nancy Davenport-Ennis
Founder/Chairman of the Board
Board of Directors

Executive Board

Nancy Davenport-Ennis  
Founder, Chairman of the Board

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Board President  
Professor of Medicine  
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Patient Advocate Foundation

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California
Osteoporosis

This is the second year I have been in the position of needing help with the co-pay on an expensive medication. Having a serious medical condition that has now dictated that I leave my part-time job obviously strains the budget of senior citizens. Without the help from this program we would not be in the position of eliminating something important to our health and well being. I attempted to apply online and ran into a snag; my computer did not cooperate. I called and was pleased with the offer, ‘let me help you through’; there was no longer a snag. The person on the other end indicated that she would take my information and I would receive the necessary documents via mail. That indeed did happen. The quality of service is second to none. Questions are answered whether by phone or email. All is greatly appreciated.

Shelly L., daughter of Arvin V.
Kentucky
Multiple Myeloma

I am Shelly L., daughter of survivor Arvin V., 75 years young. He is alive but this illness has sickened me almost as much as him. I am an only child and a nurse. It hurts me to watch him suffer but thank you so much for helping us. You helped our family so much.
Patient Advocate Foundation (PAF) celebrated eighteen years of service to patients across the United States in FY 2013/2014. From humble beginnings in 1996 serving 157 patients who had been diagnosed with a chronic, life-threatening or debilitating disease, PAF served 88,150 patients from July 1, 2013 to June 30, 2014. Each patient served faced some type of healthcare access issue, whether it be with their insurance company, their employer or they were facing medical debt crisis issues. PAF professional staff made over 1.1 million contacts to the various stakeholders necessary to resolve the patients’ issues.

Fiscal year 2013/2014 was a year of transition for PAF. After founding and leading both Patient Advocate Foundation and National Patient Advocate Foundation for more than seventeen years, Nancy Davenport-Ennis stepped down from the day-to-day management position as Chief Executive Officer to focus on broader healthcare and policy initiatives and to serve as Chairman of the Board of Directors. After an extensive multi-year search, the Executive Board of Directors unanimously named Dr. Alan Balch as CEO for PAF and NPAF beginning July 1, 2013. Dr. Balch has a decade of executive level leadership in the nonprofit sector, most recently as the Vice President of the Preventive Health Partnership, a national health promotion initiative between the American Cancer Society, American Diabetes Association and the American Heart Association.

In order to recognize Nancy Davenport-Ennis for being the Founder and CEO of Patient Advocate Foundation and National Patient Advocate Foundation for over 17 years and in celebration of Nancy’s indelible legacy, the role model she has cultivated for service and stewardship, and the promise of future legacy by this essential organization, PAF announced our Patient Advocate Foundation Legacy Campaign.

In 2016, Patient Advocate Foundation (PAF) will mark twenty years of serving patients with direct, individualized case management. Twenty years of service is itself exceptional, but we want to mark this important milestone by helping our millionth patient. This remarkable goal demonstrates PAF’s strength as well as the growing unmet need throughout our society.
The Kacey Carneal artwork featured above reflects the importance of PAF’s work. It was donated to PAF more than a decade ago in appreciation of our daily efforts to “stop one heart from breaking.” We look at it anew as we boldly proclaim our 2016 goal of “stopping our millionth heart from breaking.”

Our campaign goal was one million dollars to be put to work immediately and directly in response to the growing demand for PAF’s services. Working with the support and investment of our donors and community, we can serve our millionth patient during our 20th Anniversary year. Every gift to the Legacy Campaign honored Nancy Davenport-Ennis’ efforts over the years, starting with our first patient in 1996 to 697,962 helped to date. This growth reflects the ever expanding need across the country for our services; a need that will grow as more people gain insurance and encounter barriers navigating a complicated and challenging system of medical coverage, payment, and access.

We would like to thank the following companies and individuals who participated in the Legacy Campaign:

**Industry Sponsors**

**PREMIER:**

![AMGEN](image)

![Celgene](image)

![Lilly](image)

**LEGACY CAMPAIGN**
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Novartis

CONTRIBUTOR:
Millennium: The Takeda Oncology
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Pfizer Oncology

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James J. McMahon
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Niels Moore
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Rob and Megan Oden
Jack and Connie Reitz
Alan Richardson
Mark Sherwood
Stephanie Trunk
Felix and Sandra Venezuela
Carey and Chantal Waldrip
Paul Weigle
Tom and Kathleen Werling
Gina M. Wisman
Joe and Kathy Witt
Alan and Beth Wood

Laurie H.
Georgia
Breast Cancer

I am so grateful that you
extended help since I have
been unable to work.
Legacy Reception

On June 18, 2014, Patient Advocate Foundation and National Patient Advocate Foundation honored the legacy of Nancy Davenport-Ennis, Founder and Chairman of the Board during a reception held at the Washington Court Hotel in Washington, DC. In attendance were Congresswoman Lois Capps (D-24th-CA) and Congressman Robert C. “Bobby” Scott (D-3rd-VA) who both provided remarks about their interaction and work with Nancy. After Alan Balch PAF/NPAF CEO welcomed the guests, a video that detailed the founding of PAF/NPAF and Nancy’s vision was shown. Past Board President Christian Downs spoke about Nancy and her work as did several members of the NPAF President’s Council. It was a fitting tribute to the individual who founded and led both organizations since 1996 and to celebrate Nancy’s contributions to service, policy, and advocacy on behalf of patients.
FY 2013/2014 saw implementation of the Affordable Care Act (ACA) and the first open enrollment period for consumers to purchase an insurance product through the Federal and state Health Insurance Marketplace and Exchanges. PAF developed a training curriculum for the case management staff to educate them on how to educate and enroll patients into the various Marketplace/Exchange models. The curriculum had two levels: the first, a basic overview level designed for Co-Pay Relief and all case management staff; and the second was a three day comprehensive Marketplace enrollment training that included the government issued 30 hour training module that was augmented by PAF with additional materials relative to our specialized work.

Additionally, the Data Management Division created a Marketplace Pre-Enrollment Targeted Patient Climate Survey for patients who were seeking either education and/or enrollment into a Marketplace/Exchange insurance product. Patients were asked, if they were no longer insured, why? They were asked reasons why they had elected not to get health insurance. Highlights of the survey, which was conducted from October 1, 2013 to March 31, 2014 include:

- 35% of the respondents were uninsured for over a year
- 71% were able to afford less than $100 per month for insurance premiums
- 64% reported that affordability is the primary factor in selecting their health insurance
- 56% responded that their biggest hope was access to healthcare

Since our inception in 1996, PAF has provided direct, sustained patient assistance to more than 697,000 patients and touched millions more through the PAF website, online chats and outreach events. Direct Patient Services staff served 88,150 patients in FY 2013/2014. PAF professional staff made over 1.1 million contacts on behalf of patients to the various stakeholders necessary to resolve the patients’ cases and issues. Of the patients assisted, 63.3% were female and 36.7% were male, remaining very consistent with the gender breakdown from previous fiscal years. PAF’s professional case managers work daily to help patients solve their healthcare access issues whether they be insurance issues (39.4%), debt crisis/cost of living issues (25.7%), uninsured issues (16.7%), educational requests (10.5%), disability issues (6.3%) or employment issues (1.5%). The resolutions obtained included:

### Resolutions of PAF Case Management Patients in FY 13/14

- **Uninsured Resolutions**: 17.7%
- **Debt Crisis/Cost of Living Resolutions**: 30.1%
- **Disability Resolutions**: 7.1%
- **Insurance Resolutions**: 43.4%
- **Employment Resolutions**: 1.6%
Each patient is assigned to a dedicated case manager who provides personalized and free assistance. We serve as active liaisons, working on behalf of the patient, providing a high touch, white glove service. If an application needs to be completed, the case manager will work with the patient to complete and submit the application. Services provided include:

- Pre-Authorization Approvals
- Coding and Billing Error Resolutions
- In-Depth Appeals Assistance
- Debt Crisis Resolutions
- Assistance with Expediting Assistance Applications
- Clinical Trials Education
- Patient Education
- Outcomes Reporting
- Collection of Real Time Data

PAF serves all age groups and all ethnicities as referenced below. As noted in the 2013 Patient Data Analysis Report (PDAR) authored by Dr. Joan DaVanzo and Dr. Al Dobson with the firm Dobson DaVanzo and Associates in Vienna, VA, “the PAF patient population has become increasingly representative of the overall U.S. population in terms of several demographic characteristics, particularly ethnicity. No other resource in the healthcare system provides the same level of detailed information on some of America’s most vulnerable patients.”

PAF has several programs that target disparate populations. One is the National Hispanic/Latino Outreach Program (NHLOP) which was launched in 2001. At that time, 1.24% of the patients seeking assistance were Hispanic/Latino. In FY 2013/2014, that number has increased to 13.4%. There is bilingual staff in the Headquarters office in Hampton, VA, in San Diego, CA and in the San Antonio, TX office. The majority of PAF authored publications have been translated into Spanish as has the PAF website. The publication “Your Guide to a Healthier Hispanic/Latino Community” was created for use during outreach to this population and is available in both English and Spanish.

Outreach events attended by bilingual NHLOP case managers included:

- The “Voice of the Customer” event in San Diego
- The Univision, Radiografía de Obamcare Town Hall Meeting and Public Forum
- Latino Health Equity Conference

The NHLOP team was able to reach over 1,500 attendees at 37 outreach events, including visits to physician offices and clinics, distributing over 1,100 publications.
Patterned after NHLOP, the **National African American Outreach Program (NAAOP)** was officially launched in 2004 with African American case managers providing peer-to-peer outreach. In FY 2013/2014, fourteen percent (14%) of the patients assisted were African American. Additional outreach events included:

- National Black Nurses Association Annual Conference
- Sickle Cell Disease Association of America Conference
- University of Missouri-St. Louis Black Women and Breast Cancer Conference
- National Association of Black Social Workers Conference

In total, the NAAOP team attended 35 outreach events, distributing over 4,100 publications and reaching over 3,100 attendees.

Another program targeting a defined population is PAF’s **Senior Services Division** within case management. Created in 2004 with the roll-out and implementation of the Medicare Part D plan, dedicated case managers assist seniors with plan selection and enrollment based upon the patients’ needs. In FY 2013/2014, 31.3% of the patients assisted were commercially insured and 32.4% were uninsured. Other types of insurance for our patients included:

- Commercial Insurance .................. 31.3%
- Uninsured .................................... 32.4%
- Medicare ..................................... 23.5%
- Medicaid ................................. 12.0%
- Military Benefits ......................... 0.9%

Household income data showed that in FY 2013/2014 63.7% of our patients made $23,000 or less annually. Just over 80% made $35,000 or less.

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Sheila W.
Alabama
Fibromyalgia

I found PAF online by chance. I had no idea that there were people like this that would help people like me. No one can understand how hard it is to live on such a tight budget that even a surprise and unexpected copay of 25 to 50 dollars can cause a lot of trouble. I have even found myself using my money for food to pay for a co-pay on a new medicine. I cannot express how much I appreciate the help I received from the Patient Advocate Foundation. I’m sure there are many other people in the same situation I am and some much older and unable to even search for or not physically able to search for help and don’t take their medicine because of high cost (co-pays, co-ins, etc.) Thank you again PAF for all your help. I will never forget you!
Cancer continues to be the leading diagnosis patients are facing when they reach out to PAF; however there was a 9% decrease in the number of cancer patients served in FY 2013/2014. Nervous System Conditions and Chronic and/or Debilitating Conditions both doubled as the disease categories cited by patients (4.52% to 9.4% and 2.91% to 5.4% respectively). Within the cancer space, Breast Cancer was the number one cancer of the top ten cancers reported at 27.8%. Breast Cancer was followed by Colorectal Cancer (12.5%) and Lung Cancer (8.6%).

PAF is unique in that it is not a disease specific organization. In FY 2013/2014, PAF provided assistance to patients with one of 320 chronic, life-threatening or debilitating diseases. This list has expanded primarily due to an increase in the number of CareLines that PAF operates through the MedCareLine Division within Case Management.

* PAF case management served 76 cancer diagnoses, the top 10 cancer diagnoses represent 71.5% of all cancer diagnoses

Roy P.
Texas
Lung Cancer, Stage IV

April called and has been a God sent angel and without her we would be weeks betting. She is very kind, considerate and she knows how to get answers and how to talk to people.
The MedCareLine is a customizable and disease specific case management program. The MedCareLine was launched in 2006 with the Colorectal CareLine (CCL) which is still in operation. The staff on a CareLine team tend to be more clinical in nature and very knowledgeable in the reimbursement arena. The CareLine can also have a Financial Aid Fund (FAF) component to provide small, one-time grants for patient needs such as transportation. The Colorectal CareLine assisted 1,472 patients in FY 2013/2014 and is sponsored by and in partnership with Amgen, Inc. and Genentech. Other CareLines include:

The Aetna Clinical Appeals CareLine, which was launched in June of 2012, provides Aetna members the benefit of PAF case management services through direct referral to PAF as a part of Aetna’s appeals process. The staff on this CareLine use their knowledge of coverage issues, health care resources and clinical experience to independently find solutions to the members’ challenges. The Aetna Clinical Appeals CareLine served 337 Aetna members in FY 2013/2014.

The Narcolepsy CareLine was launched in 2012 in partnership with sponsor Jazz Pharmaceuticals. This team of professional case managers provides services to patients who have been diagnosed with narcolepsy and their providers and caregivers. Patients are assisted with insurance appeals, guidance on insurance benefit reimbursement and benefit programs, assistance with enrolling into Medicare, Medicaid and screened and enrolled into disability programs if appropriate. The Narcolepsy CareLine assisted over 1,800 patients in FY 2013/2014.

The Heart Valve CareLine, sponsored by and in partnership with Edwards Lifesciences, launched in 2013 and is a national, toll-free patient and provider hotline designed to provide free healthcare information and case management services to patients who have been diagnosed with heart valve conditions. In 2014, a companion Financial Aid Fund (FAF) was sponsored by Edwards Lifesciences to assist patients with a small one-time grant to help them with the out-of-pocket expenses associated with heart valve health care.

Also in 2013, PAF launched the FoundationOne CareLine, sponsored by and in partnership with Foundation Medicine. The FoundationOne CareLine is staffed by a clinical team who provide case management services to patients who are seeking education, access and reimbursement for genomic testing in order for them, and their physician, to make informed decisions on choosing the most appropriate treatment options.

The Uninsured Medication Access Program (UMAP) also operates under the MedCareLine division. UMAP is a customizable, full service program that facilitates the identification of, screening for and enrollment into an appropriate alternate insurance product. Working with

Randolph T. Virginia
Multiple Myeloma

PAF was helpful, caring and considerate. They took time explaining about how the Patient Advocate Foundation works. I’m very grateful for everything. Keep the good works up!
pharmaceutical manufacturers, the goal is to move patients who are currently enrolled in the manufacturers free drug program into an insurance product thus making them eligible for expanded access to health care. Enrollment options include Medicare, Medicaid, employer sponsored insurance as well as the products offered through the Marketplace/Exchange.

PAF launched a new CareLine in January 2014—the Bronchial Thermoplasty CareLine. Supported by and working in partnership with Boston Scientific, this CareLine provides hands-on navigation of the reimbursement system, insuring patient access to emerging therapies and treatment. Assistance is particularly provided in the appeals process as the product associated with treating Bronchial Thermoplasty is often deemed experimental and denied payment by insurers.

In FY2013/2014 PAF was able to obtain over $47 million in Debt Relief thru all case management programs on behalf of patients as detailed in the chart below.

### Debt Relief Obtained for PAF Case Management Patients in FY 13/14

<table>
<thead>
<tr>
<th></th>
<th>Amount Recovered</th>
<th>Charitable Contribution Received</th>
<th>Cost of Living</th>
<th>Patient Amount</th>
<th>Provider Amount</th>
<th>Write off Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Debt Relief* Obtained in FY13/14: $47,499,409</td>
<td></td>
<td></td>
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</tbody>
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* Case managers can only document financial relief that is reported and/or recovered during the course of work for an open case. Any long term or future financial benefits resulting from resolutions are not captured.

- **Amount Recovered**: the amount PAF recovered from third party payers such as commercial insurance plans and Medicaid or Medicare programs
- **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
- **Cost of Living**: the amount recovered by PAF case managers to directly offset living expenses such as: rent/mortgage assistance, eviction/foreclosure assistance, utility assistance, food/nutritional assistance, or car payment/repair expenses among others.
- **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 previously been written off or logged by the facility as “uncollected”
- **Write Off Amount**: The amount of patient debt relief obtained by PAF through negotiations with facilities and/or medical providers.
Patients are referred to PAF from various sources with other Patient Advocate Groups leading the Top Ten Referral Sources. While not a Top Ten Referral Source, Other Referral Sources includes:

- Organizations
- Relative
- PAF Staff Member
- Patient
- Employer
- Legal
- Church
- PAF Outreach
- Collection Agency
- PAF Board Member Referral
- Breakaway from Cancer
- School

Top Ten Referral Sources for PAF Case Management Patients in FY 13/14

* Top 10 referral sources exhibit represents 92.4% of all case management referral

National Partnerships

Patient Advocate Foundation is unique in that it provides services to other national non-profit organizations, both in case management and in operating Financial Aid Funds. In FY 2013/2014, PAF completed its sixth year of partnership with the American Cancer Society (ACS), where PAF serves as their tier 3 case management service provider. In FY 2013/2014, PAF received 7,854 patient referrals from ACS which resulted in 6,416 patients being served by the partnership. The remaining 1,438 patients were served by other PAF programs that could best meet their needs, including a MedCareLine program.
PAF continues its partnership with the LIVESTRONG Foundation, now in its 10th year. PAF was one of the original partners in the SurvivorCare program, with dedicated case managers providing sustained assistance to referred patients. PAF assisted 3,441 LIVESTRONG Foundation referred patients in FY 2013/2014. An additional component of the partnership is the PAF Austin, Texas – based Case Manager. This case manager is a PAF employee who is housed at the LIVESTRONG Foundation Cancer Navigation Center in Austin to assist patients in the greater Austin area who walk into the Center for assistance. In FY 2013/2014, the on-site case manager assisted 529 patients.

In August 2013, the partnership with the LIVESTRONG Foundation was further expanded when PAF partnered with them and Movember to create the Radiation Co-Payment Small Grants Fund to assist men who have been diagnosed with prostate cancer and need financial assistance in paying the co-payments for their radiation treatments. PAF provided one-time $1,000 grants to 456 patients in FY 2013/2014.

PAF launched the PAF/Komen Treatment Assistance Financial Aid Program in July 2013. This program is solely supported by Susan G. Komen and provides one-time $300 grants to help women diagnosed with breast cancer. The grants covered transportation costs to and from treatment, lymphedema care, wigs/prosthesis and durable medical equipment. There is also a dedicated case manager available for patients who don’t qualify for the financial aid program to assist them in accessing appropriate services.

PAF completed its fourth year of partnership with the Cancer Treatment Centers of America (CTCA) in FY 2013/2014 and provided case management services to 327 patients. This partnership assists patients who are seeking care at a CTCA facility and were facing insurance issues and the inability to afford the out-of-pocket expenses.

In August 2013, PAF completed the fifth and final year of a Cooperative Agreement with the Centers for Disease Control. The Early Detection of Cancer in Underserved Populations (SCUP) goal was to increase the survivorship of cancer and to enhance quality of life in underserved populations by providing case management services to those patients. PAF was able to assist 977 SCUP patients in FY 2013/2014 and met and/or obtained all of the goals within the project. Over the five year time period (2008-2013) the project:

- Assisted 14,861 patients; an additional 40,557 who met the SCUP criteria were assisted by other PAF programs
- Educated, screened and/or enrolled 5,101 patients into a clinical trial
- Obtained over $11 million in debt relief
- Participated in 215 outreach events

Breakaway from Cancer
May 11-18, 2014

The Amgen Tour of California (AToC) is a Tour de France-style cycling road race that takes cyclists through hundreds of miles of California’s iconic and beautiful highways, byways and coastlines each spring. The teams chosen to participate have included Olympic medalists, Tour de France contenders and World Champions.

The 2014 Amgen Tour of California traveled the following routes:

- Stage 1: Sunday, May 11 – Sacramento
- Stage 2: Monday, May 12 – Folsom (individual time trial)
- Stage 3: Tuesday, May 13 – San Jose to Mount Diablo
- Stage 4: Wednesday, May 14 – Monterey to Cambria
• Stage 5: Thursday, May 15 – Pismo Beach to Santa Barbara
• Stage 6: Friday, May 16 – Santa Clarita to Mountain High
• Stage 7: Saturday, May 17 – Santa Clarita to Pasadena
• Stage 8: Sunday, May 18 – Thousand Oaks (circuit race)

Bradley Wiggins from Team Sky was the overall winner of the 2014 Amgen Tour of California.

Breakaway from Cancer (BFC) was created by Amgen in 2005 to increase awareness of the resources that are available to cancer patients, from the full continuum of prevention, support, access and survivorship. This partnership includes Amgen and four national non-profit organizations who provide education, resources, hope, support and assistance no matter where a patient is in that continuum. The four Breakaway from Cancer partner organizations by focus area are:

PREVENTION: Prevent Cancer Foundation
FIGHTING CANCER: Cancer Support Community
FINANCIAL ASSISTANCE: Patient Advocate Foundation
SURVIVORSHIP: National Coalition for Cancer Survivorship

During the AToC, thousands of spectators visited the BFC Festival Tent, providing PAF staff the opportunity to educate each community and its members on PAF’s program offerings as well as those offered by BFC’s partners.

Eve Bukowski, Breakaway Mile Champion from Sacramento, CA addressing the Breakaway Mile participants

PAF CEO Alan Balch at the Sacramento, CA Breakaway Mile Celebration

Alan Balch, PAF CEO and Eve Bukowski, Breakaway Mile Champion, leading the Breakaway Mile

Eve Bukowski, Sacramento, CA Breakaway Mile Champion with Charles Planet from Team Novo Nordisk who won the Most Courageous Rider jersey during the Sacramento stage.
Breakaway from Cancer participation doesn’t stop when the Tour is completed. PAF posts strategic messages on its social media sites on the topic of Breakaway from Cancer. Throughout the life of PAF’s participation, the PAF case management staff directly educated a total of 57,454 callers on the Breakaway from Cancer program who stated that they were unaware of the program. For those that did not have knowledge of BFC, the PAF medical intake specialists and case managers educated each caller about BFC and referred them to www.breakawayfromcancer.com for more information and access to helpful resources offered by our partner organizations.

An additional 2,997 patients, providers, and/or caregivers contacting PAF cited previous knowledge of Breakaway from Cancer. These callers who reported having an awareness of BFC, reported to us that they learned of BFC from their doctor or facility, friend or family, website or through social and national televised and/or print media.

PAF distributed 1,899 BFC print brochures in PAF patient packets mailed to cancer patients being helped by PAF. In addition, PAF created and promoted 13 unique electronic QR codes that allowed attendees to access PAF’s patient materials easily from their mobile device. In addition, specific codes were created for the provider and cancer medical worker to access materials that would be relevant for them as they work to assist patients in their cancer journey.
Since the beginning of this partnership PAF has provided complete case management to a total of 30 individual patients who came to PAF from a BFC event and an additional 31 referrals directly from Amgen. Each of these patients received sustained and personalized case management assistance to resolve their specific healthcare or insurance issue.

The Patient Action Council (PAC), founded in 2009, provides a forum for like-minded pharmaceutical / biotechnology industry patient advocacy leaders to collaborate with PAF leadership to address one major health care issue. Since 2009, PAC has delivered to the United States:

- The National Underinsured Resource Directory
- www.insureUSToday.org
- The National Uninsured Resource Directory
- “My Resource Search” mobile app

The PAC project for FY 2013/2014 was creation and distribution of the publication “Health Reform and You: A User’s Guide to Health Insurance Marketplaces.” This publication is intended to help consumers better understand the new Health Insurance Marketplaces/Exchanges that were created under the Affordable Care Act and had its first open enrollment period from October 1, 2013 to March 31, 2014.

Yvette W.
Mississippi
Breast Cancer

I am truly thankful for the PAF because it too so much of a burden off of myself and my family. Co-Pays and treatment costs add up quickly and worrying about how a patient is going to pay especially while not working is frustrating. When I was told about this program, I was happy to know that it existed. Once I received my approval letter and how much was awarded to me, I was relieved and felt blessed. I would like to take time to thank you all for your services. Thank you for taking weight off my shoulders so that I may focus on recovery. Thank you sooooo much!
Marsha W.
Kentucky
Breast Cancer

September 2012, I discovered a lump in my left breast that turned out to be cancerous. The lump was removed and most of my lymph nodes under my armpit which leaves me with lymphedema and lots of neuropathy. I went through 8 sessions of chemotherapy and was then told by my oncologist that the cancer would return and that I would need a mastectomy. I was devastated. I contacted PAF after I realized I couldn’t even get an appointment with the surgeon without insurance or the ability to pay for it. I have neither. All I know is that I have to be able to do everything possible to live for my children. David has been talking with me on the phone and helping me anyway he can with resources and doing his best to find me any kind of help. I really appreciate him and this foundation. God bless you all.
The Patient Advocate Foundation Co-Pay Relief (CPR) program celebrated a milestone in FY 2013/2014, its 10 year anniversary! PAF’s CPR program is the second oldest co-pay assistance program in the United States having been created in April of 2004 when the US Health and Human Services Office of the Inspector General (OIG) issued the favorable Advisory Opinion 04-15 to PAF to operate CPR. Since 2004, the Co-Pay Relief program has assisted over 126,000 patients who qualified medically and financially, allocated more than $200 million in patient assistance, and mobilized insurance reimbursement of nearly $1 billion for providers.

In FY 2013/2014, CPR provided cash co-payment assistance to 20,835 qualified patients, paying out $32,612,359 in expenditure payments to providers, pharmacies and, in some instances, patients themselves. Of the qualified patients, 17,428 patients were seeking assistance for the first time and 3,407 patients had received assistance from CPR in prior years. The program staff fielded 121,460 telephone calls and processed 64,019 claims in support of qualified patients out-of-pocket expenses for required co-payments, co-insurance and deductibles. With regards to gender, 80.8% of the patients assisted were female with 19.2% were male. The CPR Breast Cancer fund is one of our more heavily utilized funds, thus driving the female numbers.

As part of the 10 year celebration, PAF leadership looked at re-branding CPR. A new logo was designed and unveiled at the American Society of Clinical Oncology (ASCO) meeting in Chicago in June, 2014. There were key operational enhancements made to the program during FY 2013/2014. Those include:

- Reserving the FULL award amount for patients on an first come, first served basis in most disease funds
- Having a “look back” period of 6 months from the date of a patient’s approval
- Accepting submission of expenditures for up to two (2) months after expiration of the patient’s award year, allowing for insurance processing time

Additionally, CPR instituted a process for patients who have no activity on their account for 120 consecutive days. Approved patients who exceed four months (120 day) without any expenditures will have their accounts closed and the funds released back in the appropriate disease fund to be used by newly approved patients.

Age Groups of PAF Co-Pay Relief Patients in FY 13/14

- Over 65: 55.1%
- 56 to 65: 23.8%
- 46 to 55: 13.9%
- 36 to 45: 5.6%
- 26 to 35: 1.4%
- Birth to 18: 0.1%
- 19 to 25: 0.1%
- 25 to 35: 0.6%
Personalized assistance is still a prominent feature of the Co-Pay Relief program. Patient, physician and pharmacy secure web-based portals are available 24 hours a day. There is the capability to upload required documents directly into the application. Or the user can download a fax cover sheet with a unique bar code that when faxed, will automatically upload the documents to the account. Electronic signature is available wherever a signature is required. Once approved, which typically takes 24-48 hours after the application is fully completed, the patient and provider(s) are notified via mail and portal messaging (if used) of the one year approval.

In addition to operational enhancements, PAF set five standards that result in a high quality patient experience. They are:

- Patients Get and Stay on Therapy
- Customized to the Patient
- Right Amount of Assistance-At the Right Time
- Access is Simple and Efficient
- “Best in Class” Compliant Program

Patient Advocate Foundation has always adhered to the guidance provided through the Advisory Opinion issued by the OIG. We can assist with co-payments, co-insurance, deductibles and insurance premiums. CPR can cover co-payments for therapeutic and supportive medications prescribed by the physician for treating the patient’s disease. PAF also strives to conform all programmatic operations and disease fund definitions to the Advisory Opinion. We conduct an annual external audit of policies, procedures, work flows and operational compliance. PAF conducts an external financial audit annually and prepares audited financial statements. And PAF ensures that those audited financial statements, Form 990s and Annual Reports are posted on the PAF website for public review. To date there have been no deficiencies noted in any audit conducted by and/or for PAF and its programs.

The PAF CPR program is also in the midst of a multi-year-long project for developing a new database platform that will ultimately be used across all programs. The first program to transition to the new database will be CPR and is expected to take place in Q2 of the 2014/2015 fiscal year.

Patient Advocate Foundation would like to thank the companies who financially supported the Co-Pay Relief program in FY 2013/2014.

### Ethnicity of PAF Co-Pay Relief Patients in FY 13/14

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caucasian</td>
<td>75.9%</td>
</tr>
<tr>
<td>African American</td>
<td>14.0%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
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<tr>
<td>Native Hawaiian/Pacific Islander</td>
<td>0.4%</td>
</tr>
<tr>
<td>Asian</td>
<td>2.0%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>0.2%</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>0.2%</td>
</tr>
<tr>
<td>Blended Race</td>
<td>0.4%</td>
</tr>
</tbody>
</table>

Patient Advocate Foundation would like to thank the companies who financially supported the Co-Pay Relief program in FY 2013/2014.
Patient Advocate Foundation continues to be represented in Tier One media outlets, particularly in light of the new federal and state Marketplace/Exchanges. National media included:

- US News and World Report
- New York Times
- Los Angeles Times
- Wall Street Journal
- Coping with Cancer
- Roll Call
- Associated Press
- Businessweek
- Physician’s Money Digest
- GenomeWeb Daily News
- YouTube
- PR Web

Local and Regional Media Outlets

- The August Chronicle
- Orange County Register
- Sacramento Bee
- Daily Press
- Philadelphia Inquirer
- NC Political News
- Latino Times
- Tewksbury Town Crier
- Thousand Oaks Acorn
- Richmond Times-Dispatch
- Houston Chronicle
- Greater Baton Rouge Business Report
- The Virginian Pilot

Web/Blog Sites

- LIVESTRONG Blog
- Talkabouthealth.com
- Envita Guest Blog
- Accretive Health Blog
- Cleveland.com
- Diahome.org
- Breastcancer.org
- The Daily Scan Blog
- Insurance.com
- MBCHbuzz
- Jan Hasak blog
Consumers, patients and providers not only learn about PAF through the various media outlets but also through visiting our numerous websites. PAF maintains many websites for the various programs as detailed in the breakdown of page views, unique visitors and the average amount of time spent on the site:

<table>
<thead>
<tr>
<th>Website</th>
<th>Page Views</th>
<th>Unique Visitors</th>
<th>Average Time</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="http://www.patientadvocate.org">www.patientadvocate.org</a></td>
<td>919,979</td>
<td>307,860</td>
<td>2:05 minutes</td>
</tr>
<tr>
<td><a href="http://www.copays.org">www.copays.org</a></td>
<td>832,477</td>
<td>110,871</td>
<td>3:18 minutes</td>
</tr>
<tr>
<td><a href="http://www.npaf.org">www.npaf.org</a></td>
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<td>2:10 minutes</td>
</tr>
<tr>
<td><a href="http://www.insureUStoday.org">www.insureUStoday.org</a></td>
<td>8,116</td>
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<td>1:36 minutes</td>
</tr>
<tr>
<td><a href="http://narcolepsy.pafcareline.org">http://narcolepsy.pafcareline.org</a></td>
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<td>3,120</td>
<td>1:59 minutes</td>
</tr>
<tr>
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<td>955</td>
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</tr>
<tr>
<td><a href="http://www.promiseofhope.net">www.promiseofhope.net</a></td>
<td>6,109</td>
<td>1,708</td>
<td>1:38 minutes</td>
</tr>
</tbody>
</table>

Sherrill M.
Maine
Multiple Myeloma

I would like to let you know how much I appreciate being able to use the Co-Pay Relief and how easy to apply for compared to some programs. I am so pleased to receive this as I have been on chemo for two years and very expensive and have just finished some radiation as cancer has appeared in a different location. I have used much of my retirement funds to keep going and even though I have insurance on my own (as I cannot work anymore) the monthly premium and co-pays are very expensive to keep up with. You have a wonderful, helpful program going here and I will pass this along to others along the way. Very appreciative of all your help. Thank you, thank you!!
On June 17 – 18, 2014, PAF convened its 15th Annual Patient Congress in Washington, DC at the Washington Court Hotel. With over 100 attendees, this event engaged patients, caregivers, advocacy group representatives, and National Patient Advocate Foundation (NPAF) volunteers to advance movement on issues surrounding medical debt, medical bankruptcy and the impact on patients through the Medical Bankruptcy Fairness Act of 2014 & Medical Debt Responsibility Act of 2013.

To open the event, Patient Congress attendees were invited to participate in a Welcome Reception and Educational Expo. During a healthy and hearty reception, attendees mingled and got acquainted with one another and enjoyed the company of other non-profit patient and advocacy groups that were in attendance. These groups were able to exhibit and share information on their organizations with our attendees.

PAF wishes to thank the following Educational Expo Exhibitors: Arthritis Foundation, Breakaway from Cancer, Cancer Support Community, Co-Pay Relief, FORCE: Facing Our Rick of Cancer Empowered, Imerman Angels, Lung Cancer Alliance, Patient Advocate Foundation, Prevent Cancer Foundation, The Leukemia & Lymphoma Society, Men’s Health Network, and National Coalition for Cancer Survivorship.

During the Capitol Hill Briefing sessions, the Honorable Larry LaRocco (D-ID) – former United States Congressman and Senior Counsel to Goddard Gunster discussed the importance of protecting patients from the hardships caused by medical debt. Josh Karetny, Chief Economic Counsel and Deputy Legislative Director – Office of
Senator Sheldon Whitehouse (D-RI) spoke on the Medical Bankruptcy Fairness Act of 2014 (S.2471). Attendees also heard from Erika Jeffers, Senior Policy Counsel and Kirk Schwarzbach, Senior Professional Staff with the US House Committee on Financial Services. Their topic was the Medical Debt Responsibility Act of 2013 (HR.1767).

After the Capitol Hill Briefing, attendees eagerly worked their way to the Hill and conducted 143 Hill visits that included 82 in the U.S. Senate and 61 in the U.S. House of Representatives. Their visits included 88 with Democrats, 54 with Republicans, and 1 with an Independent member.

To culminate the days of hard work leading up to and during Patient Congress, a Dinner Symposium was held where attendees were encouraged to relax and enjoy the success of the past few days.

Gathered in the Grand Ballroom of the Washington Court Hotel, the group was honored to hear from PAF and NPAF Founder and Chairman of the Board, Nancy Davenport-Ennis. Nancy shared with the group what inspired her to create not one, but two foundations and dedicate seventeen years of her life to helping patients with access to healthcare. Upon completion of the keynote, an exceptional patient advocate currently battling cancer herself, Kathleen Werling, was recognized for all her contributions to PAF, NPAF, and patient advocacy and presented with the Patient Advocate Foundation and National Patient Advocate Foundation Outstanding Courage and Dedication in Patient Advocacy Award.

Nancy Davenport-Ennis, Alan Balch and Kirk Schwarzbach with the US House Committee on Financial Services

Nancy Davenport-Ennis, PAF/NPAF Chairman of the Board discusses the newest NPAF program, Project Innovation

Larry LaRocco, former United States Congressman and Senior Counsel to Goddard Gunster addresses our attendees

Attendees during the Opening General Session

Photos by James Tkatch, James Tkatch Photography
PAF wishes to thank the following sponsors for their support of Patient Congress:

- Amgen Oncology
- Bristol-Myers Squibb
- Cancer Treatment Centers of America
- Celgene
- Lilly
- Genentech
- GlaxoSmithKline
- McKesson
- Merck
- Millennium: The Takeda Oncology Company
- Novartis Oncology
- Pfizer Oncology
- Walgreens

Kathleen Werling and NPAF staff member Donna Atkins who presented Kathleen the Patient Advocate Foundation and National Patient Advocate Foundation Outstanding Courage and Dedication in Patient Advocacy Award

Patient Congress attendees after meeting with an aide to Senator Jeff Sessions (R-AL)

Attendees from Virginia meeting with US Congressman Rob Wittman (R-1st-VA) (4th from left)

Senator Joe Manchin’s (D-WV) aide listens as an attendee tells her story

Keynote speaker at the Dinner Symposium, Nancy Davenport-Ennis, Founder and Chairman of the Board tells Patient Congress attendees how Patient Advocate Foundation and National Patient Advocate Foundation came to be

NPAF President of State Advocacy and Community Outreach Larry Lanier closes out the Dinner Symposium and Patient Congress for 2014
Scholarship for Survivors Program

The PAF Scholarship for Survivors program was created in 2000 by Founder Nancy Davenport-Ennis to provide financial assistance to patients who have suffered or are currently suffering from a life-threatening disease or chronic condition that may be affecting their educational opportunities. Each scholarship recipient has excelled academically, served in the community and has a desire to pursue a secondary education, despite a disease diagnosis.

Each Scholarship for Survivors recipient receives an annual $3,000 award for each year that he/she is enrolled in a higher education program. They must maintain a GPA of 3.0 or higher, be a full time student, and must complete a minimum of 20 hours of community service work.

To date, PAF (along with other gracious funders) has awarded scholarships to 55 students totaling over $400,000. The 2014/2015 academic year Scholarship for Survivors recipients are:

THE KAREN L. REEDER AWARD
Jacob Silberg
Maplewood, NJ
School: Harvard College

SCHOLARSHIP FOR SURVIVORS AWARD
Joshua Weinstein
Berkeley, California
School: University of California Berkeley

Richard Suarez
Glassboro, New Jersey
School: Rowan University

Kimberly Santo
Gainesville, Florida
School: University of Florida

Coreyonna Welch
Carrollton, Georgia
School: University of West Georgia

Oliver Adlam
Milledgeville, Georgia
School: Georgia College

Alexandra Xifaras
Fairhaven, Massachusetts
School: Boston University

THE CHERYL GRIMMEL AWARD
Sheralyn Beck
Benton, Arkansas
School: University of Little Rock Arkansas

THE MARK STEPHENS AWARD
Yosef Glaser
Baltimore, Maryland
School: Bais Hamedrash & Mesivta of Baltimore

THE MONICA BAILES AWARD
Katrina Polivak
Georgetown, TX
School: The University of Texas School of Public Health

THE U.S. REPRESENTATIVE JO ANN DAVIS AWARD
Nathan Hertz
San Marcos, TX
School: University of Texas at San Antonio

THE ROBIN PRACHEL AWARD
Hanna Hughes
Rochester, Minnesota
School: University of Minnesota, Duluth
Patient Advocate Foundation was recognized once again by Charity Navigator with a fifth consecutive 4-star rating, the highest rating given. Out of the more than 7,000 charities rated by Charity Navigator, only 4% receive 5 consecutive 4-stars. Charity Navigator evaluates the financial health and accountability/transparency of an organization and its commitment to good governance, best practices and openness with information.

Ken Berger, President and CEO of Charity Navigator says “Our goal in all of this is to provide donors with essential information needed to give them greater confidence in the charitable choices they make. Only 4% of the charities we rate have received a least 5 consecutive 4-star evaluations, indicating that Patient Advocate Foundation outperforms 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.”

To view PAF’s review please visit the PAF Charity Navigator Profile at www.charitynavigator.org

Judy W.
Virginia
Breast Cancer

Where are the words to adequately thank you for the generous and invaluable help you have given me with my increasingly more expensive prescription medicines? My husband and I are retired and living on social security and our modest savings. When my medicines went over $1000 a month earlier this year, we weren’t sure what we were going to do. It was with great relief and gratitude that we learned about your organization and the help you are able to offer. I was diagnosed with Stage IV metastatic breast cancer in 2007. Through these last years, I have benefited from excellent and compassionate care. In spite of this awful disease, there have been many blessing along the way – the loving support of my family and community, feeling the awesome power of prayer and now this most recent blessing – the most generous and appreciated help from the Co-Pay Relief program. I am richly blessed.
Dorothy B.
Georgia
Neuropathy

Thank you so much for your professionalism and processing my claim so quickly. With a small income (as I have) and living alone, handling my health issue, it makes me so nervous. It’s wonderful when I have to discuss anything with your office. They are always so helpful and kind. Your help with my meds and your staff is a blessing. Thank you! Thank you!

---

Joseph Cali
New York
Hepatitis C

When my doctor told me the cost of my meds I was overwhelmed but he said insurance might cover it all, wouldn’t know until we apply. Next the pharmacy called and said I was approved and that my co-pay would be $10,500. I was floored but with your help it took some of the sting out of it. What’s not to like about your great organization. Keep up the good works.
Patient Advocate Foundation held its 13th Annual A Promise of Hope Affair on February 22, 2014 at the Newport News Marriott at City Center. The A Promise of Hope Affair has become a premier event in the Tidewater Area, drawing over 350 guests from Hampton Roads and as far away as the state of Washington.

This year’s theme “A Mardi Gras Masquerade” was enjoyed by our guests who attended the event masked and dressed in Black Tie attire. The event began with a Welcome Reception followed by a dinner in the Grand Ballroom (sponsored by Amgen Oncology). During the dinner our guests were updated on PAF’s service outreach and had the pleasure of meeting a PAF patient and volunteer advocate, Kathleen Werling, and learning how PAF provided some much needed assistance to Kathleen and her family to keep them from losing their home as she battled cancer.

Attendees were also addressed by US Congressman Robert C. “Bobby” Scott (D-3rd-VA) and by Louis Jacques, Director, Coverage and Analysis Group, Centers for Medicare and Medicaid Services. The highlight of the evening was our keynote speaker, Nancy Davenport-Ennis, Founder and Chairman of the Board. Nancy served as CEO for the first 17 years of our 18. She told the story of why and how PAF and NPAF came into being…all in memory of one young women, Cheryl Grimmel, who was a friend of Nancy and Jack’s and lost her three year battle with breast cancer. Cheryl faced many access issues that Nancy set out to correct and to ensure that no one with a chronic, life-threatening or debilitating disease would have to face insurance, job retention or medical debt crisis issues alone.

Barbara Ciara, WTKR-Channel 3 managing editor and news reporter, served as our Mistress of Ceremonies and assisted Alan Balch, CEO with recognition of our event sponsors. Barbara also utilized her playful personality to facilitate our live Patient Advocate Foundation Legacy Campaign auction!

As the dinner came to an end, Slapnation began playing a jazzy tune and the casino games opened! Our guests enjoyed playing blackjack, roulette and the craps tables, as they continued to bid on
Our guests bidding on Silent Auction items

This couple got into the Mardi Gras spirit

US Congressman Robert C. “Bobby” Scott (D-3rd-VA) addresses our guests

Event Sponsor Millennium representative Tom Sellers with Alan Richardson, PAF Chief Development Operations Officer and Promise of Hope Chair

Angela Walker, PAF Chief of Talent Management recognizes Leslie Field with Event Sponsor Novartis

Jeff Clemons with Event Sponsor BB&T and Bill Nason, PAF Chief Operating Officer

Pat Jolley with PAF and Kim Tiller with Gold Table Sponsor Purdue Pharma

A PROMISE OF HOPE AFFAIR
silent auction items throughout the evening via an electronic bidding system.

Each year, the support of our Anchor Committee, sponsors, auction donors, guests, staff and Board of Directors, assists PAF with raising funds to continue helping patients resolve their insurance, job retention and/or debt crisis matters relative to their diagnosis of a chronic, life threatening or debilitating disease. This year’s event raised over $295,000 inclusive of in-kind donations, sponsorships, and the silent and live auction.

**Anchor Committee**

Cindy Black, Old Point National Bank  
Bruce Breeger, Breeger Media Group  
Jeffrey W. Clemons, BB&T  
Denise Counce, TowneBank  
Eugene M. Jordan II, Old Point National Bank  
Donna McMahon, TowneBank  
Alicia Thornwell, SunTrust Bank  
Nancy Davenport-Ennis, Founder & Chairman of the Board  
Alan Balch, PhD, Chief Executive Officer  
Fran Castellow, MSEd., President-Operations  
Jack Ennis, Chief Development Officer  
Alan Richardson, Chief Development Operations Officer  
Shawn Nason, Special Events Director

**Honorary Chairs**

**United States House of Representatives**

Congressman Rob Wittman (R-1st-VA)  
Congressman Robert C. “Bobby” Scott (D-3rd-VA)

**Commonwealth of Virginia**

Senator Emmett W. Hanger, Jr.(R-24th)  
Senator Janet Howell (D-32nd)  
Senator Mamie E. Locke (D-2nd)  
Senator McEachin (D-9th)  
Delegate Barbara Comstock (R - 34th)  
Delegate Mark Keam (D-35th)  
Delegate Kaye Kory (D-38th)  
Delegate Vivian E. Watts (D-39th)  
Delegate Timothy D. Hugo (R-40th)  
Delegate Robert K. Krupicka, Jr. (D-45th)  
Delegate David J. Toscano (D-57th)  
Delegate Riley E. Ingram (R-62nd)  
Delegate Glenn Davis, Jr. (R-84th)  
Delegate David E. Yancey (R-94th)  
Delegate Brenda L. Pogge(R-96th)

Mayor George Wallace, City of Hampton  
Vice Mayor Linda Curtis, City of Hampton  
Councilwoman Chris Sneed, City of Hampton  
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Councilwoman Sharon P. Scott, City of Newport News  
Councilwoman Tina Vick, City of Newport News  
Councilwoman Dr. Patricia Woodbury, City of Newport News  
The Honorable Mary T. Christian  
Dr. Louis Jacques, MD
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Danielle Jackson
Monica Stokes
Cynthia Espenshade
Brandy Gilliam

Jackie Neal
MaryKay Villa
Rochelle Yarborough
Tracy Fairbanks
Shauna Hatfield
Sarah Oliver
Letitia Ward

**Promise of Hope Chair Alan Richardson with Barbara Ciara, the evening’s Mistress of Ceremonies from local CBS Affiliate WTKR-Channel 3**

**Co-Founder Jack Ennis, Dr. Louis Jacques- Director, Coverage and Analysis Group Centers for Medicare and Medicaid Services and Nancy Davenport-Ennis, Founder and Chairman of the Board**

**Dr. Alan Balch, PAF CEO and Dr. Dennis Gastineau, outgoing PAF/NPAF Board of Directors President**

**Patient Advocate Foundation and National Patient Advocate Foundation staff**

**Photos by Amy Ellen Lee, Twilight Studio Designs**

_A Promise of Hope Affair_
Lesa C.
Iowa
Breast Cancer

I was shocked when I received my diagnosis of breast cancer last November. It was overwhelming and very frightening to know, that despite not having a history of breast cancer in my family, I was facing this disease. For six months, my life has been filled with challenges. There have been many bright spots as my family and friends have supported me in so many unbelievable ways. The Patient Advocate Foundation Co-Pay Relief was an unexpected surprise. I am so grateful to have this additional financial support to assist in paying for my treatment. Your organization has helped me on my journey to continued health and happiness. Thank you from the bottom of my heart.
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Crystal Nails
Cynthia Espenshade
Deanies Salon@The Jagged Edge
Dollywood
Dr. Bruce Avery
Ferguson Center for the Arts
Five Guys Burgers and Fries
I am very satisfied with the communication and professionalism of my call counselor. The program was explained completely. I would recommend PAF to others and tell them you can get assistance with co-pays for meds while undergoing cancer treatment.
Chuck & Donna Adkins
Kelly A. Alvord
Amgen Foundation Staff Credit
Reed and Corenne Anderson
Carolyn Andrews
Debbie Andrus
Tracy Andrus
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Dick Auer
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Ward Bailey
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Nicole Bowen
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Tracy Fairbanks
Rose Fancelli
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Brandy Gilliam
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Hadley Hart Group
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DeShaun Hall
Rosalie M. Halligan
Kathleen L. Halpin
PAF is a participant in the Combined Federal Campaign (CFC) which was established by the United States government as a way to provide Federal civilian, postal and military personnel the opportunity to support eligible non-profit organizations providing health and human service programs. The mission of the CFC is “to promote and support philanthropy through a program that is employee focused, cost-efficient, and effective in providing all federal employees the opportunity to improve the quality of life for all.” PAF’s CFC number is 10681. You are also able to designate Patient Advocate Foundation with your local 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’s FEIN number is 54-1806317.
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David Campbell
Cathy Ebbeson
City of Arvada, Employee Giving
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Louanne Bakk
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Robert & Lynn Downing
Neal & Laveda Voytek
Margaret O’Brien
Mr. & Mrs. Kenneth Jensen
Irmone L.
Florida
Breast Cancer

PAF was a godsend to me as I was afraid that I would not have been able to continue my treatment and this disease is a scary one. With my condition it was a blessing as I did not need more stress to my stressful situation. You gave me the assurance that I would be able to continue my treatment and I would be fine. That is why I would help someone in crisis and refer them to PAF.
### Patient Advocate Foundation

**Statements of Financial Position**

**June 30, 2014**

<table>
<thead>
<tr>
<th>Assets</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General operating cash and cash equivalents</td>
<td>$4,121,397</td>
<td>$3,143,52</td>
</tr>
<tr>
<td>Restricted cash and cash equivalents</td>
<td>$41,733,713</td>
<td>$30,812,296</td>
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<tr>
<td>Unconditional promises to give</td>
<td>183,529</td>
<td>453,417</td>
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<tr>
<td>Related party receivable</td>
<td>-</td>
<td>391</td>
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<tr>
<td>Service contract receivable</td>
<td>426,523</td>
<td>402,722</td>
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<tr>
<td>Employee travel advances</td>
<td>476</td>
<td>672</td>
</tr>
<tr>
<td>Inventories</td>
<td>47,958</td>
<td>104,461</td>
</tr>
<tr>
<td>Prepaid expenses</td>
<td>476,623</td>
<td>226,540</td>
</tr>
<tr>
<td>Investments and cash equivalents</td>
<td>1,909,422</td>
<td>1,846,290</td>
</tr>
<tr>
<td><strong>Total current assets</strong></td>
<td>$48,899,641</td>
<td>$36,990,310</td>
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<tr>
<td><strong>Property and equipment - net</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2,403,781</td>
<td>1,225,238</td>
<td></td>
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<tr>
<td><strong>Other assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Refundable deposits</td>
<td>53,331</td>
<td>103,631</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td>$51,356,753</td>
<td>$38,319,179</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Liabilities and Net Assets</th>
<th>2014</th>
<th>2013</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current portion of obligation under capital lease</td>
<td>$64,869</td>
<td>$37,866</td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>1,276,956</td>
<td>681,349</td>
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<tr>
<td>Due to related party</td>
<td>104,390</td>
<td>-</td>
</tr>
<tr>
<td>Deferred revenue</td>
<td>3,304,936</td>
<td>2,882,010</td>
</tr>
<tr>
<td>Accrued vacation leave</td>
<td>229,833</td>
<td>380,199</td>
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<tr>
<td><strong>Total current liabilities</strong></td>
<td>4,980,984</td>
<td>3,981,424</td>
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<tr>
<td><strong>Long-term liabilities</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Obligation under capital lease - less current portion</td>
<td>150,235</td>
<td>144,579</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>90,855</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total liabilities</strong></td>
<td>5,222,074</td>
<td>4,126,003</td>
</tr>
<tr>
<td><strong>Unrestricted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Unrestricted</td>
<td>2,582,399</td>
<td>1,534,590</td>
</tr>
<tr>
<td>Unrestricted - board designated</td>
<td>1,909,422</td>
<td>1,846,290</td>
</tr>
<tr>
<td><strong>Total unrestricted net assets</strong></td>
<td>$4,491,821</td>
<td>$3,380,880</td>
</tr>
<tr>
<td><strong>Temporarily restricted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>41,642,858</td>
<td>30,812,296</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>46,134,679</td>
<td>34,193,176</td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>$51,356,753</td>
<td>$38,319,179</td>
</tr>
</tbody>
</table>

*Extracted from audited financial statements for the year ended June 30, 2014*
## Patient Advocate Foundation
### Statements of Activities
#### Years ended June 30, 2014/2013

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Designated</th>
<th>Total</th>
<th>Temporarily Restricted</th>
<th>Total</th>
<th>Unrestricted</th>
<th>Designated</th>
<th>Total</th>
<th>Temporarily Restricted</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Revenues, gains and other support</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Contributions:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Grants</td>
<td>3,838,793</td>
<td>-</td>
<td>3,838,793</td>
<td>44,166,677</td>
<td>48,005,470</td>
<td>4,578,357</td>
<td>-</td>
<td>4,578,357</td>
<td>34,177,188</td>
<td>38,755,545</td>
</tr>
<tr>
<td>Private and public donations</td>
<td>58,163</td>
<td>-</td>
<td>58,163</td>
<td>-</td>
<td>74,109</td>
<td>-</td>
<td>74,109</td>
<td>-</td>
<td>74,109</td>
<td>-</td>
</tr>
<tr>
<td>Donated services and materials</td>
<td>63,220</td>
<td>-</td>
<td>63,220</td>
<td>-</td>
<td>75,832</td>
<td>-</td>
<td>75,832</td>
<td>-</td>
<td>75,832</td>
<td>-</td>
</tr>
<tr>
<td>Program Administration</td>
<td>10,810,595</td>
<td>-</td>
<td>10,810,595</td>
<td>8,670,194</td>
<td>199,860</td>
<td>29,396,661</td>
<td>-</td>
<td>29,396,661</td>
<td>8,670,194</td>
<td>199,860</td>
</tr>
<tr>
<td>Patient Congress</td>
<td>255,315</td>
<td>-</td>
<td>255,315</td>
<td>-</td>
<td>309,801</td>
<td>-</td>
<td>309,801</td>
<td>-</td>
<td>309,801</td>
<td>-</td>
</tr>
<tr>
<td>Promise of Hope</td>
<td>255,502</td>
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<td>255,502</td>
<td>-</td>
<td>309,801</td>
<td>-</td>
<td>309,801</td>
<td>-</td>
<td>309,801</td>
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</tr>
<tr>
<td>Miscellaneous income</td>
<td>419,560</td>
<td>-</td>
<td>419,560</td>
<td>-</td>
<td>210,958</td>
<td>-</td>
<td>210,958</td>
<td>-</td>
<td>210,958</td>
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</tr>
<tr>
<td>Investment income (loss)</td>
<td>183,911</td>
<td>63,132</td>
<td>247,043</td>
<td>196,564</td>
<td>(74,425)</td>
<td>122,139</td>
<td>-</td>
<td>122,139</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total revenues, gains and other support</strong></td>
<td>49,221,174</td>
<td>63,132</td>
<td>49,284,306</td>
<td>10,830,562</td>
<td>60,114,868</td>
<td>43,712,336</td>
<td>(74,425)</td>
<td>43,637,911</td>
<td>4,780,527</td>
<td>48,418,438</td>
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<tr>
<td><strong>Expenses and losses</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program services</td>
<td>6,104,503</td>
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<td>6,104,503</td>
<td>5,671,565</td>
<td>-</td>
<td>5,671,565</td>
<td>-</td>
<td>5,671,565</td>
<td>-</td>
<td>5,671,565</td>
</tr>
<tr>
<td>Financial Aid Programs</td>
<td>36,879,762</td>
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<td>36,879,762</td>
<td>32,614,888</td>
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<td>32,614,888</td>
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<td>32,614,888</td>
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<td>32,614,888</td>
</tr>
<tr>
<td>Service contracts</td>
<td>2,592,607</td>
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<td>2,592,607</td>
<td>2,630,444</td>
<td>-</td>
<td>2,630,444</td>
<td>-</td>
<td>2,630,444</td>
<td>-</td>
<td>2,630,444</td>
</tr>
<tr>
<td>Supporting services:</td>
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<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Management and general</td>
<td>1,499,698</td>
<td>-</td>
<td>1,499,698</td>
<td>1,662,222</td>
<td>-</td>
<td>1,662,222</td>
<td>-</td>
<td>1,662,222</td>
<td>-</td>
<td>1,662,222</td>
</tr>
<tr>
<td>Fundraising</td>
<td>1,094,097</td>
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<td>1,094,097</td>
<td>964,185</td>
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<td>964,185</td>
<td>-</td>
<td>964,185</td>
<td>-</td>
<td>964,185</td>
</tr>
<tr>
<td>Loss on abandonment of fixed assets</td>
<td>2,700</td>
<td>-</td>
<td>2,700</td>
<td>342,000</td>
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<td>342,000</td>
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<td>342,000</td>
<td>-</td>
<td>342,000</td>
</tr>
<tr>
<td><strong>Change in net assets</strong></td>
<td>1,047,809</td>
<td>63,132</td>
<td>1,110,941</td>
<td>(172,968)</td>
<td>(74,425)</td>
<td>4,780,527</td>
<td>4,533,134</td>
<td>-</td>
<td>4,533,134</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net assets - beginning of year</strong></td>
<td>1,534,590</td>
<td>1,846,290</td>
<td>3,380,880</td>
<td>30,812,296</td>
<td>34,193,176</td>
<td>1,920,715</td>
<td>3,628,273</td>
<td>26,031,769</td>
<td>29,660,042</td>
<td>-</td>
</tr>
<tr>
<td><strong>Net assets - end of year</strong></td>
<td>2,582,399</td>
<td>1,909,422</td>
<td>4,491,821</td>
<td>41,642,858</td>
<td>46,134,679</td>
<td>1,534,590</td>
<td>1,846,290</td>
<td>30,812,296</td>
<td>34,193,176</td>
<td>-</td>
</tr>
</tbody>
</table>

Extracted from audited financial statements for the year ended June 30, 2014.
### COMBINED FUNCTIONAL EXPENSES FY13/14

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>$45,576,871.00</td>
<td>94.6%</td>
</tr>
<tr>
<td>Management &amp; General</td>
<td>$1,499,698.00</td>
<td>3.1%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$1,094,097.00</td>
<td>2.3%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$48,170,666.00</strong></td>
<td></td>
</tr>
</tbody>
</table>

### COMBINED REVENUE AND EARNINGS FY13/14

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Grants</td>
<td>$48,005,470.00</td>
<td>79.9%</td>
</tr>
<tr>
<td>Program Administration</td>
<td>$10,810,595.00</td>
<td>18.0%</td>
</tr>
<tr>
<td>Gifts &amp; Contributions</td>
<td>$477,723.00</td>
<td>0.8%</td>
</tr>
<tr>
<td>Event Revenue</td>
<td>$510,817.00</td>
<td>0.8%</td>
</tr>
<tr>
<td>Interest</td>
<td>$247,043.00</td>
<td>0.4%</td>
</tr>
<tr>
<td>In-Kind Service</td>
<td>$63,220.00</td>
<td>0.1%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$60,114,868.00</strong></td>
<td></td>
</tr>
</tbody>
</table>

### COMBINED PROGRAM ACTIVITIES FY13/14

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Case Management, Outreach &amp; Education Programs</td>
<td>$6,104,503.00</td>
<td>13.4%</td>
</tr>
<tr>
<td>Financial Aid Grants &amp; Administration</td>
<td>$36,879,762.00</td>
<td>80.9%</td>
</tr>
<tr>
<td>Service Contracts</td>
<td>$2,592,607.00</td>
<td>5.7%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$45,576,872.00</strong></td>
<td></td>
</tr>
</tbody>
</table>
CEO Cabinet
Alan Balch, CEO
Fran Castellow, President, Operations
Beth Moore, President, Mission Delivery
Bill Nason, Chief Operating Officer

Executive Round Table
Alan Balch, CEO
Fran Castellow, President, Operations
Beth Moore, President, Mission Delivery
Bill Nason, Chief Operating Officer
Jack Ennis, Co-Founder and Chief Development Officer
Alan Richardson, Chief Development Operations Officer
Erin Moaratty, Chief of Mission Delivery
Angela Walker, Chief of Talent Management
Kevin Cox, Chief Information Officer

Leadership Team
Beverly McNearley-DeRavalliere, Director-Co-Pay Relief Program
Jennifer Brewster, Director-Contract Vendor Services
Courtney Jones, Senior Case Management Director
Liz Vitola, Director of Analytics and Data Management
Jennifer Dow, Talent Manager
Mary Kay Villa, Controller
Carey Waldrip, Director of Special Projects
Shawn Nason, Special Events Director
Renee Bell, IT Director-Systems
David Newsom, IT Director-Operations

Executive Round Table (ERT) members at A Promise of Hope Affair
Bill Nason, Chief Operating Officer; Angela Walker, Chief of Talent Management; Jack Ennis, Chief Development Officer and Co-Founder; Nancy Davenport-Ennis, Founder and Chairman of the Board; Dr. Dennis Gastineau, outgoing PAF/NPAF Board of Directors President; Dr. Alan Balch, CEO; Alan Richardson, Chief Development Operations Officer; Beth Patterson, President of Mission Delivery; Kevin Cox, Chief Information Officer; and Fran Castellow, President of Operations
Acknowledgements

Editor and Writer: Alan Richardson, Chief Development Operations Officer

Contributors: Alan Balch, CEO
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Bill Nason, Chief Operating Officer
Liz Vitola, Director of Analytics and Data Management
Shawn Nason, Special Events Director
Debbie Andrus, Payroll Administrator
Chanda Cox, Travel and Outreach Coordinator
Carey Waldrip, Director of Special Projects

Photography: Breakaway from Cancer: Kristy Morrow
Promise of Hope: Amy Ellen Lee, Twilight Studio Designs
Patient Congress: James Tkatch, James Tkatch Photography
Legacy Reception: James Tkatch, James Tkatch Photography

Patient Advocate Foundation
421 Butler Farm Road Hampton, Virginia 23666
Tel: (757) 873-6668 Fax: (757) 873-8999
1-800-532-5274

Lewis P.
Pennsylvania
Metastatic Prostate Cancer

My overall experience with Co-Pay Relief has been wonderful. Ten years ago when I started fighting this cancer, I had no idea it could go on this long. I had and still do have what I considered a good health insurance with a top company. I never realized that over a period of time, co-pays could ruin even a good savings. I’m sure that me along with a lot of other people could not afford the quality treatment we are receiving without your help.
Save the Date

14th Annual
A Promise of Hope Affair
February 21, 2015
Newport News Marriott at City Center
Newport News, VA

“Casablanca®… Rick’s Café…Round Up the Usual Suspects”
www.promiseofhope.net

16th Annual
Patient Congress
June, 2015
Washington, DC
www.pc.patientadvocate.org

2015/2016 Scholarship for Survivors
Scholarship Deadline:
February - March 2015
www.patientadvocate.org
Listed Under “Get Help”
“Apply for an Academic Scholarship”