BUILDING A CASE FOR Hope
PAF professionals directly intervene on behalf of more than 100,000 patients annually, enabling them to access prescribed healthcare services and medications, overcome insurance barriers, locate resources to support cost of living expenses while in treatment, evaluate and maintain health insurance coverage and better manage, or reduce, the out-of-pocket medical debt associated with an illness.
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OUR MISSION

Patient Advocate Foundation is a national 501(c)(3) non-profit organization which provides case management services and financial aid to Americans with chronic, life-threatening and debilitating illnesses.

PAF case managers serve as active liaisons between the patient and their insurer, employer and/or creditors to resolve insurance, job retention and/or debt crisis matters as they relate to their diagnosis.

Patient Advocate Foundation seeks to safeguard patients through effective mediation assuring access to care, maintenance of employment and preservation of their financial stability.
Welcome

PAF provides hope and help to one patient at a time. This report serves as an annual assessment and presentation of PAF’s impact on the lives of patients and their caregivers. We design our programs and services to optimize their ability to make a difference and then we apply specific metrics to measure their impact.

We have now served roughly 928,078 patients with direct support since our inception in 1996. In this past year, PAF worked with 105,792 patients and made over 1.4 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, 54% of the patients PAF served through our case management department had a household income of less than $23,000.

PAF’s professional staff is dedicated to finding unique solutions to complex financial, logistical, and administrative problems faced by our patients. In 2016, the Patient Advocate Foundation’s case management programs served more than 20,000 patients, resolving 36,173 unique issues on their behalf, and our financial assistance programs allocated more than $86 million to 50,944 patients. This report highlights other key programs and services as well.

The many programs and activities outlined herein would not be possible without the generosity of our supporters. We optimize each donation, no matter how big or small, through our commitment to the fiscal stewardship of those gifts. Of every dollar raised, roughly 96% goes to support a program that will directly impact a patient.

PAF was once again awarded a 4-star rating from Charity Navigator, its highest rating, for the 7th consecutive year. Only 3% of the charities rated have received 7 consecutive 4-star ratings.

“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
PAF routinely monitors data from our programs to gauge the impact of our patient service activities, to ensure that the programs and initiatives are aligned with the organization’s mission and to always keep the patients’ needs in the foreground.

### Summary of PAF Total Patient Cases and Contacts in 2016

<table>
<thead>
<tr>
<th>Service Area</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patient Services Division Case Count</td>
<td>105,792</td>
</tr>
<tr>
<td>Case Management Division Case Count</td>
<td>20,286</td>
</tr>
<tr>
<td>Co-Pay Relief Case Count</td>
<td>49,760</td>
</tr>
<tr>
<td>Financial Support Programs Case Count</td>
<td>22,081</td>
</tr>
<tr>
<td>Patient Services Email Helpline Session Count</td>
<td>13,665</td>
</tr>
<tr>
<td>Total Patient Services Division Case Contacts</td>
<td>1,405,906</td>
</tr>
<tr>
<td>Total Patients Served by PAF as of 2016</td>
<td>928,078</td>
</tr>
</tbody>
</table>
Testimonials

“On October 7, 2016 I was diagnosed with breast cancer. As a mother of two young boys I knew I had to fight to survive to help raise them. I never imagined within weeks I would have a bigger battle to fight. I was being denied my employer’s disability insurance. I was very frustrated and didn’t know where to turn. A friend recommended the Patient Advocate Foundation. I was fortunate enough to be connected with a case manager who talked about how we could request reconsideration. She helped me through the entire process, she conference-called the insurance company with me on the line and she also helped me write a letter to the company. Thanks to my case manager’s help, I received the disability pay. She not only helped in the fight, she regularly called to check on me and to ask if I needed any other help. Indeed I did! She agreed to help with an outstanding DNA testing bill that doesn’t appear to be covered by insurance. I wish every cancer patient could have a PAF case manager in their corner.”

Amy H. | California | Breast Cancer

“I requested assistance from PAF with a medication issue. I was extremely pleased with the help I received and was referred to. The time used to assist me was precious and the end results were very appreciated.”

Hilda C. | New York | Rectal Cancer

“I am a veteran diagnosed with cancer. It has been difficult for me to call out for help when I have always been the one providing the help. The Patient Advocate Foundation helped sustain my housing and address the expenses associated with everyday living. With my heart in hand, thank you from the bottom of my heart for the support, care and humanitarian act you rendered on my behalf and the other veterans like me.”

Edwin H. | Florida | Cancer

“PAF’s service was absolutely excellent and my case manager was a godsend. I needed assistance with disability and her handling of my issue was so professional – she is worth all the gold in Fort Knox.”

Michael J. | Pennsylvania | Bladder Cancer

“I just wanted to say thank you for having such awesome staff members helping people like me that are dealing with life issues like HIV. You made me feel like I really matter and you did a great job getting me approved to get help from the Patient Advocate Foundation’s Co-Pay Relief Program. I was worried and now I can get my medication. Thank you.”

Wallace H. | Florida | HIV

“Most people would not be able to take the cost of life-saving treatment without the Co-Pay Relief Program.”

Arthur R. | Washington | Hepatitis C
Testimonials

“During the Holiday Season... I finally received the number to Patient Advocate Foundation, where I left a message and the next day a case manager returned my call. Little did I know she would be the blessing of the day and year. She helped me make the same phone calls I had been making all week without getting any answers. She went beyond the call of duty to get answers I needed to move forward with receiving my medications. She spoke to pharmacies, nurses and representatives until she received what was needed. Due to my case manager’s determination to help me, I found out what my co-pay was and then she worked to get help. She followed up with a letter thanking me for my call, but she did all the work, making sure an individual’s health came first. Thank you so much and may God bless PAF as you continue to help others.”

Roshyn C. | South Carolina | Pulmonary Hypertension

“Everything was to my satisfaction, with regard to the medication issue – which is something for which I am eternally grateful – God bless you.”

Blanca A. | Michigan | Brain Tumor

“I wanted to take a moment to let you know what your organization has meant to me. I’ve been dealing with breast cancer since July. Fortunately for me, when it seemed I would be overwhelmed with the paperwork, my PAF case manager got in touch with me – words just cannot describe ALL he did. You have to understand before he got involved I did not have the time to take care of my health, I was too busy fighting with insurance companies. My insurer at one point approved a hospital stay for me, and after the fact denied coverage!!! Then the hospital sent me a bill for $66,000!!! Then 12 different doctors started sending their bills. I was so overwhelmed and was undergoing chemotherapy at the time. My case manager stepped in, and after dozens and dozens of phone calls and emails. I don’t know how he did it, but the insurance company paid the $66,000 bill, and most of the doctors were also paid. What a relief-I was not in this fight alone, there are people - not just my case manager - but an entire organization out there that cared about me. Thank you so very much!”

Barbara D. | Arizona | Breast Cancer

“My PAF advocate spoke with billing and had information sent to me to get help with my medical bills. She also contacted a resource to help me get my medications at a lesser cost.”

Mary R. | South Carolina | Autoimmune Disorder

“Your staff was helpful and friendly and assisted with all of my questions and the follow up by your Co-Pay Relief Program has been exceptional. There are many individuals who are experiencing extremely high costs for medications and medical treatments not covered by their insurance. Thank you for your assistance to date – it has allowed me to go forward with another medication, which may literally save and significantly extend my life and my work.”

William W. | South Carolina | Prostate Cancer
Case Management

4 NEW PROGRAMS Launched
- Jennifer Jaff CareLine
- ALS Association Medicare Home Health & Chapter Education
- ZERO360: Comprehensive Patient Support
- West Virginia Lung Cancer CareLine

394,630 CONTACTS MADE While Resolving Cases
Averaging 19.45 Contacts Per Patient Served

MORE THAN 20% INCREASE in PATIENTS with CARDIOVASCULAR CONDITIONS or CHRONIC and/or DEBILITATING CONDITIONS

Case Management (compared to previous year)
- 11% more patients served
- 19% more unique issues resolved

TOP ISSUES Faced by Patients Seeking Case Management Help
- Insurance Issues: 41.10%
- Debt Crisis/ Cost of Living Issues: 25.74%
- Uninsured Issues: 9.64%

SOME TOP RESOLUTIONS Achieved by Case Managers
- Facilitated/Obtained Medical and Pharmaceutical Co-pay Assistance
- Marketplace/Exchange Plan Selection/Enrollment Assistance
- Facilitated/Secured Free Transportation Assistance
- Approval/Overtturned Denial of Disability Benefits
- Approved for Medicaid

8 | 2016 ANNUAL IMPACT REPORT
### Case Management Program
Completed 20 Years of Service in April 2016

**Negotiated**

$31,700,020 in DEBT RELIEF on Behalf of Patients

**20% DECREASE**
in the Number of Uninsured Issues Reported By Patients

---

#### CASE MANAGEMENT PATIENTS

**Age of Patients**

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth to 18</td>
<td>1.86%</td>
</tr>
<tr>
<td>19 to 25</td>
<td>4.11%</td>
</tr>
<tr>
<td>26 to 35</td>
<td>12.48%</td>
</tr>
<tr>
<td>36 to 45</td>
<td>12.60%</td>
</tr>
<tr>
<td>46 to 55</td>
<td>21.94%</td>
</tr>
<tr>
<td>56 to 65</td>
<td>27.18%</td>
</tr>
<tr>
<td>Over 65</td>
<td>19.82%</td>
</tr>
</tbody>
</table>

**Insurance Type**

<table>
<thead>
<tr>
<th>Insurance Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercially-Insured</td>
<td>36.36%</td>
</tr>
<tr>
<td>Medicare</td>
<td>34.83%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>14.01%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>13.82%</td>
</tr>
<tr>
<td>Military Benefits</td>
<td>0.98%</td>
</tr>
</tbody>
</table>

**Employment Status**

<table>
<thead>
<tr>
<th>Employment Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disabled</td>
<td>24.84%</td>
</tr>
<tr>
<td>Employed</td>
<td>24.34%</td>
</tr>
<tr>
<td>Unemployed</td>
<td>22.89%</td>
</tr>
<tr>
<td>Retired</td>
<td>22.18%</td>
</tr>
<tr>
<td>Self-employed</td>
<td>2.62%</td>
</tr>
<tr>
<td>Full Time Student</td>
<td>1.75%</td>
</tr>
<tr>
<td>Homemaker</td>
<td>1.38%</td>
</tr>
</tbody>
</table>
Case management was the original patient service program offered by Patient Advocate Foundation (PAF) when the organization was founded in 1996, with a mission to provide assistance to both insured and uninsured patients who have been diagnosed with a chronic, life-threatening and/or debilitating illness. Today, PAF case managers directly intervene on behalf of thousands of patients each year, enabling them to connect with and maintain access to prescribed healthcare services, overcome insurance barriers, locate resources to support cost-of-living expenses, evaluate and identify insurance coverage and manage out-of-pocket expenses associated with medical treatment.

During 2016, the case management programs experienced substantial growth, increasing the number of patients served by 11% over the previous year; launching four new programs, expanding two existing programs and introducing two new financial aid funds. There was a 9.8% rise in the number of cancer patients served, while the number of patients reporting chronic and/or debilitating conditions increased almost 25%, and the number of cardiovascular patients grew by more than 22%.

More than 72% of patients contacting PAF reported an annual household income of $35,000 or less. Approximately the same percentage of case management patients reported being disabled (24.8%) as employed (24.3%), while 22.1% were retired.

Overall, the PAF case managers assisted 20,286 patients, encompassing 419 different diagnoses. These patients reported 36,173 unique healthcare access issues, a 19% increase from the previous year.

The top three issues faced by patients seeking case management assistance were Insurance Issues at 41.10%, Debt Crisis/Cost of Living Issues at 25.74% and Uninsured Issues at 9.64%. Insurance Issues included co-pays for pharmaceuticals and facility/doctor visits; co-insurance assistance for hospital/facility visits and for Medicare cost share; and general benefit/coverage questions. Debt Crisis/Cost of Living Issues included inability to afford transportation expenses, inability to afford rent/mortgage, inability to afford utilities and inability to afford food/nutritional needs. Uninsured Issues included no access to care, no access/no coverage for prescription needs, unpaid medical bills and Medicaid application assistance needed.

Reaching resolution on these issues required PAF’s professional case managers to make 394,630 contacts with the patient, providers, insurers, non-profit charities or organizations and pharmaceutical programs. On average, there were 19.45 contacts made per patient assisted. The case managers actively worked with...
the patients to obtain charity write-offs, assist with enrolling into disease-specific and pharmaceutical assistance programs, correcting coding and billing issues and identified alternative funding to aide in maintaining insurance coverage. The case managers were able to obtain $31,700,020 in debt relief this year on behalf of PAF patients.

The top three resolutions achieved by case managers were Insurance Resolutions at 41.20%, Debt Crisis/ Cost of Living Resolutions at 28.83% and Uninsured Resolutions at 8.66%. Insurance Resolutions included facilitated/obtained co-pay assistance, negotiation of payment plan/discount, education on general benefit/coverage questions, facilitated/obtained full/partial charity care for the underinsured and enrollment into pharmaceutical indigent drug program. Debt Crisis/ Cost of Living Resolutions included facilitated/secured free or charity based transportation assistance, facilitated rental/mortgage payment relief, facilitated utility/phone relief and offset cost through alternative assistance. Uninsured Resolutions involved facilitating access to care through local clinic/hospital/doctor, facilitated/identified new insurance coverage, enrolled/approved for pharmaceutical indigent drug program, approved for charity care through hospital/medical facility and approved for Medicaid/share of cost.

**Testimonial Spotlight**

“I called PAF for assistance with medical debt. My case manager sent me hardship letters and I sent three of them to companies that billed me for lab tests. These are the co-pays that I don’t have the finances to pay anything on as I only have Social Security. God bless you for what you have been able to do.”

*Marie W. | Tennessee | Stomach Cancer*

**CASE POINT PLATINUM AWARDS - HONORABLE MENTION**

Patient Advocate Foundation was again recognized by Dorland Health with three Case in Point Platinum honorable mentions in 2016. One honorable mention was presented for Targeted Health Data Collection in the category of Health Information Technology Systems. Another was presented to PAF for the Komen Treatment Program in the Care Coordination section of the Social Work category, and finally, the Foundation ACCESS Care Line was honored.
Co-Pay Relief Program

**CPR SERVICE LEVEL PERFORMANCE**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>Expenditures Processed</td>
<td>184,880</td>
<td>52,258</td>
</tr>
<tr>
<td>Dollars Expended</td>
<td>85,792,071</td>
<td>32,630,502</td>
</tr>
</tbody>
</table>

**Patients Approved**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td>49,760</td>
<td>154,329</td>
<td>112,395</td>
</tr>
</tbody>
</table>

**Incoming Calls Handled**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
</table>
| 96.4%               | Increased | CPR PATIENTS SERVED

**CPR EXPENDED MORE THAN**

\$85.7 MILLION

in assistance to patients

**CPR SUPPORTS**

Prescribed Treatments & Secondary Medications

Regardless of Brand or Generic Status

**12 YEARS**

Co-Pay Relief Program

Completed 12 Years of Service in April 2016
Patient Advocate Foundation’s Co-Pay Relief Program (CPR) provides financial assistance to medically and financially qualified patients who are unable to afford their out-of-pocket responsibilities for pharmaceutical co-payments, co-insurance and deductibles required by their insurance plan. The Co-Pay Relief Program is the second oldest in the country, launching in April 2004. It was born of a demonstrated need within PAF’s case management division. CPR combines a robust portfolio of technology tools with a hands-on, personal service model, providing patients with instant eligibility determination speed to therapy and compassionate assistance throughout their award period.

Placing the needs of our patients at the forefront, CPR funds support all prescribed treatments and secondary medications relative to the diagnosis regardless of brand or generic status.

Electronic income verification is performed on all patients’ reported income, eliminating the need for document submission in more than 95% of cases. Applicant diagnoses and insurance are verified with treating physicians by Co-Pay staff members, further reducing the administrative burden placed on patients.

All aspects of CPR experienced substantial growth during 2016, with the program launching three new disease silos, expanding several open silos, re-opening silos that were previously closed and providing 162.9% more financial assistance to patients than in the previous year of 2015. The program approved 49,760 patients, a 96.4% increase from 2015, expended $85,792,071, with the staff processing 184,880 expenditure submissions and successfully managing 154,329 incoming calls.

The disease areas served by the program in 2016 included:

- Bladder Cancer
- Periodic Paralysis
- Breast Cancer
- Cervical Cancer
- Hepatitis B
- Hepatitis C
- HIV, AIDS and Prevention
- Homozygous Familial Hypercholesterolemia
- Lipodystrophy
- Metastatic Colorectal Cancer
- Multiple Myeloma
- Multiple Sclerosis
- Myelodysplastic Syndrome
- Non Small Cell Lung Cancer (NSCLC)
- Ovarian Cancer

Testimonial Spotlight

“I would recommend the Co-Pay Relief Program because one who really needs the assistance can get help. The call counselor was professional, patient and thorough and all questions asked were directly related to getting help for the patient. I was very satisfied with my experience.”

Gloria F | Texas | Osteoporosis
**Education & Outreach**

**Patient Empowerment Series**

- **500+ People Registered for Webinars**
  - A 24.7% Increase

**Health Equity and Community Engagement**

- **6 Ongoing Community Outreach Projects**
- **4 Targeted National Outreach Events**
  - Reaching more than 1,400 attendees

- **Selected as one of three national networks to implement “Inside Knowledge” to increase awareness of gynecologic cancers**
- **Developed & Published 5 Original Fact Sheets**
  - as part of the Determinants of Health Series
  - Resulting in nearly 1000 downloads!

**Robust, On-Demand Sessions**

Available in the Patient Empowerment Series Digital Library

*July, 2016 - Introduced the WV Lung Cancer CareLine*
PATIENT EMPOWERMENT SERIES

The Patient Empowerment Series (PES) features practical advice on the most frequently reported access barriers and/or educational concerns as identified through PAF’s years of delivering case management services. This educational series features live webinars, interactive web-based resource tools, access to the comprehensive PAF resource library and supplemental social media posts providing advice and in-depth education on healthcare issues.

In 2016, nine new webinars were presented covering topics that included Accessing Disability Benefits, Clinical Trials, Genomic versus Genetic Testing, Preventive Care, Medicare Basics and Interpreting your Insurance Drug Formulary. More than 500 attendees registered for these webinars, which represents a 24.7% increase in registrations over the previous year. The webinar series engages a diverse audience comprised of patients, caregivers, medical professionals and financial advocates, many of whom returned to attend additional sessions in the series.

The Patient Empowerment Series library now contains 15 on-demand sessions available for viewers who are striving to be informed consumers of their healthcare.

HEALTH EQUITY AND COMMUNITY ENGAGEMENT

The Health Equity and Community Engagement initiative expands the level that existing PAF programs are able to use to effectively identify underserved and under-resourced patients within the healthcare system, evaluating service gaps that may exist and developing appropriate strategies to assist. It emphasizes community outreach and partnership-building with a goal of establishing pipelines from limited resourced communities to the platform of services and resources available through Patient Advocate Foundation.

Examples of Community Level Outreach & Engagement Activities Include:

- Sister Pact (Memphis)-Breast Cancer Screening Campaign
- Memphis Breast Cancer Consortium
- Diversity in Clinical Trials (Chicago) #BeAGift Campaign
- West Virginia Lung Cancer CareLine
- Lupus Native American Partnership (Oregon) Partnership with the American College of Rheumatology

Top: PAF’s Executive Vice President of Health Equity, Shorta Chambers, at the Breast Health Collaborative of Texas Summit, which brings together local community health navigators and breast cancer patients, connecting them to community resources.

Bottom: PAF Case Manager Danna Mobley at the inaugural Memphis “LIVE: Just as We Are Event,” a community event linking Memphis residents to resources.
CENTERS FOR DISEASE CONTROL & PREVENTION (CDC) GRANT

Patient Advocate Foundation’s SelfMade Health Network (SMHN) is one of eight members of the CDC’s Consortium of National Networks to Impact Populations Experiencing Tobacco-Related and Cancer Health Disparities. SMHN is a national network of organizations, agencies and public health institutions working together to decrease cancer and tobacco-related disparities among low socio-economic status (SES) populations. Specifically, the SMHN focuses on those populations with low socio-economic characteristics in rural, urban and frontier regions.

Accomplishments Include:

* Selected Meharry Medical College as the Regional Resource Lead Organization for Region A (Tennessee) to identify and pilot best practice strategies to reduce breast cancer disparities among African-American women with low SES characteristics.

* Selected University of Kentucky College of Public Health as the Regional Resource Lead Organization to lead efforts across the Appalachia region to identify and pilot best and promising practices to reduce lung cancer disparities among Caucasian men.

* Completed first year of the SelfMade Health Network Tobacco Cessation Marketplace Project, designed to incorporate brief cessation counseling into the marketplace enrollment process among certified ACA marketplace enrollment organizations.

* Developed and published five original fact sheets as part of the Determinants of Health Series resulting in nearly 1,000 downloads.

* Selected as one of three national networks to implement “Inside Knowledge,” an educational series to increase awareness of gynecologic cancers with a focus on African-American, college-age women.

WEST VIRGINIA LUNG CANCER CARELINE

The West Virginia Lung Cancer CareLine is a partnership with the West Virginia Lung Cancer Project and provides lung cancer patients, or those being screened for lung cancer, with hands-on case management and insurance support.

Testimonial Spotlight

“I was overwhelmed – no insurance, very limited income, and a diagnosis that knocked the wind out of me. My Patient Advocate guided me, gave me options – even conference-called with me to help get me answers and started on a road that provided me assistance emotionally, financially and much needed information. I am forever grateful!!”

Nancie M. | Florida | Lymphoma
Through our Financial Aid Programs, the Patient Advocate Foundation provides small grants to patients for a broad range of support needs as well as partnering with other organizations to manage all administrative aspects of their financial assistance programs.

PAF’s financial aid portfolio is quite diverse with eight individual programs available to patients in 2016.

Financial Aid Programs served 22,081 patients in 2016. The financial aid program staff received more than 162,950 calls and processed 73,648 expenditure requests on behalf of patients.

The PAF small grant programs provide critical support for a variety of non-pharmaceutical needs including transportation costs associated with getting to and from treatment, housing and lodging, utilities, food/nutrition needs and pre-burial expenses.

Testimonial Spotlight

"Thank you for assisting me and enabling me to meet my drug co-pay. I contracted hepatitis C from a blood transfusion in the late 1980s during labor and delivery when I had a C-section. The doctors tried very hard to save me and my infant at this time. My baby boy died. But, the blood transfusions, even though they gave me hep C, saved my life. I had other children at home to take care of and I’m thankful that I was able to live to raise them. I only recently found out that I had this disease. Your gift gave me hope in being able to afford this medication. I want to thank PAF again, I will always be grateful for your wonderful organization.”

Annmarie B. | New York | Hepatitis C
**PROMISE OF HOPE**

Patient Advocate Foundation held its 15th annual Promise of Hope Affair (POH) on February 27, 2016, at the Newport News Marriott at City Center, drawing 336 guests not only from PAF’s hometown, but across the United States. The theme celebrated “Pearls and Poker,” a salute to the Roaring 20’s.

Funds raised during the silent auction and live “fund-a-need” auction benefited the Scholarship for Survivors program and allow PAF to assist new students in need each year. Barbara Ciara, WTKR-Channel 3 (CBS), managing editor and news reporter, served as our Mistress of Ceremonies.

To learn more about the Promise of Hope event, please visit promiseofhope.net.

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**PATIENT CONGRESS**

Patient Congress (PC), is a two-day symposium that strives to educate attendees on current healthcare issues at federal and state levels.

PAF convened its 17th Annual Patient Congress on June 21-23, 2016. With nearly 50 attendees, this event engaged patients, caregivers, advocacy group representatives and National Patient Advocate Foundation (NPAF) volunteers. The main topics were the impact of medical debt and medical bankruptcy on patients.

Noted speakers included: Joel Payne, Vice President, QORVIS MSLGROUP; Lauren Oppenheimer, Minority Staff Director, Senate Banking Committee/ Legislative Assistant, Office of Senator Jeff Merkley (D-OR); Erika Jeffers, Senior Policy Director, House Committee on Financial Services and Minority Staff, Ranking Member Maxine Waters (D-CA).

To learn more about the event, please visit npaf.org/patientcongress.
SCHOLARSHIP FOR SURVIVORS
The Scholarship for Survivors Program offers educational scholarships to individuals who have suffered, or currently suffer, from a life-threatening disease or chronic condition. These students have, despite their health challenges, excelled academically, served the community, and desire to pursue or complete a secondary education.

Selected applicants will receive $3,000 annually for up to four consecutive years, as long as they continue to meet the guidelines of the program.

To date, PAF has awarded 71 scholarships totaling over $436,000. To learn more about supporting the scholarship program, or to apply for a PAF scholarship, please visit patientadvocate.org/scholarships.

2016/2017 academic year Scholarship for Survivors recipients

The Cheryl Grimmel Award
Sage Chasen | PA | Lehigh University

The Mark Stephens Award
Sierra Williams | GA | University of Georgia

The Monica Bailes Award
Timothy Conners | NY | Ithaca College

The U.S. Representative Jo Ann Davis Award
Tiffany Hollihan | IN | Ball State University

The Robin Prachel Award
Nicholas Polumbo | MA | Massachusetts College of Art

The Karen L. Reeder Award
Somer Greene | CA | Occidental College

The Nancy Davenport-Ennis Award
Kaela Johnson | VA | Virginia Commonwealth University

Scholarship for Survivors Award
Alexa Hickman | TN | University of Tennessee at Chattanooga
Coreyonna Welch | GA | University of West Georgia
Alexandra Xifaras | MA | Suffolk University
Isabel Allen | MA | Boston University - College of Arts and Science

Awarded
71 SCHOLARSHIPS
TOTALING
$436,000
SINCE 2000

Left: Richie Suarez (second from left), PAF Scholarship for Survivors Recipient with guest Kelly Jo Stroemel and parents Ralph and Denise Suarez.

Right: Kaela Johnson, center, recipient of the Nancy Davenport-Ennis Scholarship for Survivors Award, with Barbara Ciara and Alan Richardson.
## Data & Survey Initiatives

### PATIENT VALUE SURVEY

<table>
<thead>
<tr>
<th>Disease/Condition</th>
<th>Response Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Breast Cancer</td>
<td>40.8%</td>
</tr>
<tr>
<td>HIV</td>
<td>15.1%</td>
</tr>
<tr>
<td>Hepatitis C</td>
<td>15.4%</td>
</tr>
<tr>
<td>Multiple Myeloma</td>
<td>21.7%</td>
</tr>
<tr>
<td>Inflammatory Arthritis</td>
<td>3.6%</td>
</tr>
<tr>
<td>Cardiovascular Disease</td>
<td>3.4%</td>
</tr>
</tbody>
</table>

#### Responses by Disease/Condition (surveyed in 2016)

59.5% of patients were asked by a doctor how they prefer to receive medical information involving care decisions.

More than 50% of patients were asked what they consider important as part of making treatment plans.

- **64.1%** Patients preferred **Partner with their doctor**
- **39.4%** Patients preferred **Facts explained in detail**
- **39.3%** Patients preferred **Impact on quality of life explained by doctor**
Each year Patient Advocate Foundation reviews the aggregate data collected from our programmatic support services and analyzes it to extract themes and trends among the patients we serve. This information allows us to build survey tools to create an evidence base to help direct our policy and advocacy efforts.

### 2016 RESEARCH INITIATIVES
- Site of Care Survey
- Hepatitis C (HCV) Access and Cost Survey
- Patient Value Survey Series

### PATIENT VALUE SURVEY SERIES
**AUGUST 2016 – DECEMBER 2016**
Person-centered care refers to a way of thinking where people using health and social services are viewed as equal partners in the planning, developing and monitoring of their care, ensuring that it meets their goals and needs.

Designed with emerging trends in precision medicine, person-centered care, and Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) implementation in mind as well as the recent development of several prominent “value assessment” tools, this survey series is tied to the Robert Wood Johnson Foundation (RWJF) grant regarding consumer clarity in healthcare. It is a market research tool designed to provide insights into what patients’ self-reported experiences are and what matters most to them regarding costs, benefits and side effects as well as key decision-making processes.

Surveys were conducted by specific diseases or conditions: multiple myeloma, hepatitis C, HIV/AIDS, cardiovascular disease, inflammatory arthritis and breast cancer. Response rates for each survey ranged from 6-33% (avg. 17%). Demographics of survey respondents were reflective of the populations served by PAF.

### AGGREGATE HIGHLIGHTS FOR 2016 SURVEYS
- 36% of respondents were male, 63% female
- 37% were age 36-55, 50% were age 56-75
- 66% were White, 21% African American and 8% Hispanic
- 38% have Medicare coverage, 38% are Commercially-Insured
- 64% of respondents reported income <$36,000 annually
- 79% had a household size of 2 or less

The primary goal of this quantitative research survey was to examine the following thematic areas from a broad patient perspective:
- Provider Communication Experience
- Disease Treatment
- Financial Implications
- Impact of Care
- Benefits & Side Effects
- Healthcare Decision Making
- Personalized Care

Additional populations will be surveyed in 2017.
### Summary of PAF Total Patient Impact in FY2015/16

<table>
<thead>
<tr>
<th>Total Category</th>
<th>Total Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patient Services Division Case Count</td>
<td>85,429</td>
</tr>
<tr>
<td>Total Case Management Division Case Count</td>
<td>18,138</td>
</tr>
<tr>
<td>Total Co-Pay Relief Case Count</td>
<td>35,940</td>
</tr>
<tr>
<td>Total Financial Support Programs Case Count</td>
<td>18,233</td>
</tr>
<tr>
<td>Total Patient Services Email Helpline Session Count</td>
<td>13,118</td>
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<tr>
<td>Total Patient Services Division Case Contacts</td>
<td>1,131,661</td>
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</table>

### Summary of PAF Case Management Impact FY2015/16

**Patient Cases and Contacts in FY2015/16**

<table>
<thead>
<tr>
<th>Total Category</th>
<th>Total Count</th>
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<tbody>
<tr>
<td>Total PAF Case Management Case Count</td>
<td>18,138</td>
</tr>
<tr>
<td>Unique Case Management Patient Issues</td>
<td>29,221</td>
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<tr>
<td>Total PAF Case Management Contacts</td>
<td>377,698</td>
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<tr>
<td>Average Contacts per Case</td>
<td>20.82</td>
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Patient Advocate Foundation  
Statements of Financial Position  
June 30, 2016 and 2015

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
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<tr>
<td><strong>Current assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>General operating cash and cash equivalents</td>
<td>$9,949,251</td>
<td>$3,425,252</td>
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<tr>
<td>Restricted cash and cash equivalents</td>
<td>163,016,738</td>
<td>72,022,026</td>
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<tr>
<td>Unconditional promises to give</td>
<td>1,368,354</td>
<td>1,603,086</td>
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<td>Service contract receivable</td>
<td>317,514</td>
<td>447,282</td>
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<tr>
<td>Due from National Patient Advocate</td>
<td>10,058</td>
<td>-</td>
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<tr>
<td>Employee travel advances</td>
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<td>300</td>
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<tr>
<td>Other receivables</td>
<td>-</td>
<td>5,590</td>
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<tr>
<td>Investments and cash equivalents</td>
<td>1,486,242</td>
<td>1,933,371</td>
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<tr>
<td>Inventories</td>
<td>29,290</td>
<td>57,869</td>
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<td>Prepaid expenses</td>
<td>459,093</td>
<td>355,231</td>
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<tr>
<td><strong>Total current assets</strong></td>
<td>176,636,540</td>
<td>79,850,007</td>
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<td><strong>Property and equipment, net</strong></td>
<td>5,784,048</td>
<td>4,522,313</td>
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<tr>
<td><strong>Other assets</strong></td>
<td></td>
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<tr>
<td>Refundable deposits</td>
<td>50,331</td>
<td>53,331</td>
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<tr>
<td><strong>Total assets</strong></td>
<td>$182,470,919</td>
<td>$84,425,651</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
<td></td>
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<tr>
<td><strong>Current liabilities</strong></td>
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<td></td>
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<tr>
<td>Accounts payable and accrued expenses</td>
<td>$1,291,405</td>
<td>$907,630</td>
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<td>Deferred revenue</td>
<td>9,461,776</td>
<td>3,246,672</td>
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<td>Accrued vacation leave</td>
<td>214,117</td>
<td>225,300</td>
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<td>Due to National Patient Advocate</td>
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<td>84,191</td>
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<tr>
<td>Current portion of long-term debt</td>
<td>246,180</td>
<td>217,918</td>
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<tr>
<td>Current portion of obligation under capital lease</td>
<td>73,912</td>
<td>68,770</td>
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<tr>
<td><strong>Total current liabilities</strong></td>
<td>11,287,390</td>
<td>4,750,411</td>
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<tr>
<td><strong>Long-term liabilities</strong></td>
<td></td>
<td></td>
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<tr>
<td>Long-term debt, less current portion</td>
<td>816,727</td>
<td>1,062,082</td>
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<tr>
<td>Obligation under capital lease, less current portion</td>
<td>62,755</td>
<td>72,654</td>
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<tr>
<td>Other liabilities</td>
<td>110,050</td>
<td>101,764</td>
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<tr>
<td><strong>Total liabilities</strong></td>
<td>989,532</td>
<td>1,236,500</td>
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<tr>
<td><strong>Unrestricted</strong></td>
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<tr>
<td>Unrestricted</td>
<td>5,801,066</td>
<td>3,680,105</td>
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<tr>
<td>Unrestricted, board designated</td>
<td>1,486,242</td>
<td>1,933,371</td>
</tr>
<tr>
<td><strong>Total unrestricted net assets</strong></td>
<td>7,287,308</td>
<td>5,613,476</td>
</tr>
<tr>
<td><strong>Temporarily restricted</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total net assets</strong></td>
<td>162,906,689</td>
<td>72,825,264</td>
</tr>
<tr>
<td></td>
<td>170,193,997</td>
<td>78,438,740</td>
</tr>
<tr>
<td></td>
<td>$182,470,919</td>
<td>$84,425,651</td>
</tr>
</tbody>
</table>
## Financial Statements

### Patient Advocate Foundation

**Statements of Activities**

**Years Ended June 30, 2016 and 2015**

<table>
<thead>
<tr>
<th></th>
<th>2016</th>
<th>2015</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Unrestricted</strong></td>
<td><strong>Designated</strong></td>
<td><strong>Unrestricted</strong></td>
</tr>
<tr>
<td><strong>Board</strong></td>
<td><strong>Temporarily</strong></td>
<td><strong>Restricted</strong></td>
</tr>
<tr>
<td><strong>Board</strong></td>
<td><strong>Temporarily</strong></td>
<td><strong>Total</strong></td>
</tr>
<tr>
<td><strong>Unrestricted</strong></td>
<td><strong>Designated</strong></td>
<td><strong>Unrestricted</strong></td>
</tr>
<tr>
<td><strong>Board</strong></td>
<td><strong>Temporarily</strong></td>
<td><strong>Restricted</strong></td>
</tr>
<tr>
<td><strong>Unrestricted</strong></td>
<td><strong>Designated</strong></td>
<td><strong>Unrestricted</strong></td>
</tr>
<tr>
<td><strong>Board</strong></td>
<td><strong>Temporarily</strong></td>
<td><strong>Restricted</strong></td>
</tr>
<tr>
<td><strong>Unrestricted</strong></td>
<td><strong>Designated</strong></td>
<td><strong>Unrestricted</strong></td>
</tr>
<tr>
<td><strong>Board</strong></td>
<td><strong>Temporarily</strong></td>
<td><strong>Restricted</strong></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>$5,777,671$</td>
<td>$57,021$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>$5,777,671$</td>
<td>$57,021$</td>
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<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Private and public donations</td>
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<td>145,021$</td>
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<td></td>
<td>3,603,734$</td>
<td>145,021$</td>
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</tr>
<tr>
<td>Donated services and materials</td>
<td>44,983$</td>
<td>71,727$</td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td>44,983$</td>
<td>71,727$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Program Administration</td>
<td>12,467,768$</td>
<td>11,599,860$</td>
</tr>
<tr>
<td></td>
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<td>-</td>
</tr>
<tr>
<td></td>
<td>12,467,768$</td>
<td>11,599,860$</td>
</tr>
<tr>
<td></td>
<td>-</td>
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<tr>
<td>Patient Congress</td>
<td>150,000$</td>
<td>77,500$</td>
</tr>
<tr>
<td></td>
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</tr>
<tr>
<td></td>
<td>150,000$</td>
<td>77,500$</td>
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<tr>
<td></td>
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</tr>
<tr>
<td>Promise of Hope</td>
<td>263,156$</td>
<td>251,504$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>263,156$</td>
<td>251,504$</td>
</tr>
<tr>
<td></td>
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<td>-</td>
</tr>
<tr>
<td>Miscellaneous income</td>
<td>398,793$</td>
<td>373,693$</td>
</tr>
<tr>
<td></td>
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<td>-</td>
</tr>
<tr>
<td></td>
<td>398,793$</td>
<td>373,693$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Investment income</td>
<td>656,052$</td>
<td>721,038$</td>
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<tr>
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</tr>
<tr>
<td></td>
<td>656,052$</td>
<td>721,038$</td>
</tr>
<tr>
<td></td>
<td>-</td>
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</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>512,115$</td>
<td>51,095,231$</td>
</tr>
<tr>
<td></td>
<td>(512,115)</td>
<td>(51,095,231)</td>
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<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Expenses and losses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program services:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient/educational services</td>
<td>6,239,892$</td>
<td>6,239,892$</td>
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<tr>
<td></td>
<td>6,239,892$</td>
<td>6,239,892$</td>
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<tr>
<td>Financial Aid Programs</td>
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<td>57,268,665$</td>
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<td></td>
<td>57,268,665$</td>
<td>57,268,665$</td>
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<td>-</td>
</tr>
<tr>
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</tr>
<tr>
<td>Service contracts</td>
<td>3,367,408$</td>
<td>3,367,408$</td>
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<td></td>
<td>3,367,408$</td>
<td>3,367,408$</td>
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</tr>
<tr>
<td>Supporting services:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Management and general</td>
<td>1,200,962$</td>
<td>1,200,962$</td>
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<tr>
<td></td>
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<td>-</td>
</tr>
<tr>
<td></td>
<td>1,200,962$</td>
<td>1,200,962$</td>
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<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>-</td>
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</tr>
<tr>
<td>Fundraising</td>
<td>1,224,902$</td>
<td>1,224,902$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>1,224,902$</td>
<td>1,224,902$</td>
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<td>-</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total expenses</td>
<td>69,301,829$</td>
<td>69,301,829$</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>69,301,829$</td>
<td>69,301,829$</td>
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<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Total expenses and losses</td>
<td>69,301,829$</td>
<td>69,301,829$</td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td>69,301,829$</td>
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<td>-</td>
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<tr>
<td></td>
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</tr>
<tr>
<td>Change in net assets</td>
<td>2,120,961$</td>
<td>1,673,832$</td>
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<tr>
<td></td>
<td>(447,129)</td>
<td>90,081,425$</td>
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</tr>
<tr>
<td></td>
<td>2,120,961$</td>
<td>91,755,257$</td>
</tr>
<tr>
<td></td>
<td>(447,129)</td>
<td>91,755,257$</td>
</tr>
<tr>
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<td>-</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Net assets, beginning of year</td>
<td>3,680,105$</td>
<td>5,613,476$</td>
</tr>
<tr>
<td></td>
<td>1,933,371$</td>
<td>72,825,264$</td>
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<td>78,438,740$</td>
<td>72,825,264$</td>
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<tr>
<td>Net assets, end of year</td>
<td>$5,801,066$</td>
<td>$1,486,242$</td>
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<tr>
<td></td>
<td>$7,287,308$</td>
<td>$162,906,689$</td>
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<td>$170,193,997$</td>
<td>$170,193,997$</td>
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## Financial Statements

### Combined Revenue & Earnings

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<thead>
<tr>
<th>Source</th>
<th>Amount</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Program Grants</td>
<td>$146,954,327</td>
<td>91.2%</td>
</tr>
<tr>
<td>Program Administration</td>
<td>$12,467,768</td>
<td>7.7%</td>
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<tr>
<td>Interest</td>
<td>$721,038</td>
<td>0.5%</td>
</tr>
<tr>
<td>Gifts &amp; Contributions</td>
<td>$455,814</td>
<td>0.3%</td>
</tr>
<tr>
<td>Event Revenue</td>
<td>$413,156</td>
<td>0.3%</td>
</tr>
<tr>
<td>In-Kind Service</td>
<td>$44,983</td>
<td>0.0%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$161,057,086</strong></td>
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</table>

### Combined Functional Expenses

<table>
<thead>
<tr>
<th>Category</th>
<th>Amount</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Services</td>
<td>$66,875,965</td>
<td>96.5%</td>
</tr>
<tr>
<td>Fundraising</td>
<td>$1,224,902</td>
<td>1.8%</td>
</tr>
<tr>
<td>Management &amp; General</td>
<td>$1,200,962</td>
<td>1.7%</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$69,301,829</strong></td>
<td></td>
</tr>
</tbody>
</table>
Ace Peninsula Hardware - Hampton
Ace Peninsula Hardware - Newport News
James Acker
AEG Cycling LLC
AEG Live LLC
AEG Merchandise, Inc.
Aegerion Pharmaceuticals
Aetna
ALS Association
Kelly Alvord
AmazonSmile
American Cancer Society
American Family Fitness
AmerisourceBergen
Amgen
Carolyn Andrews
Joaquin Anguera
Aplastic Anemia and MDS International Foundation
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Testimonial Spotlights

“Receiving a cancer diagnosis is a life-altering situation, both for the patient and for family members. I was always a very healthy and active person and hearing “you have multiple myeloma” was a great shock. While it was very disappointing to know that my cancer cannot be cured, it was also encouraging to hear that it could be treated. Thus began our venture into cancer treatment and all the various forms that this treatment would entail. Soon I was off my weekly infusions and transitioned to another treatment. We were so thrilled but then absolutely shocked when we learned what the cost of the treatment would be—even with our insurance. Being retired and on a fixed income made it impossible to afford this medication. A resource helped me apply for financial aid through your Patient Advocate Foundation Co-Pay Relief Program and I was so grateful when you agreed to help fund my co-payment. Without your generosity, I would not have been able to afford this medication. So thanks to you I am once again enjoying my life and continuing to fight my cancer.”

Patrick M. | California | Multiple Myeloma

“PAF helped me find relief from financial strains and I was able to get the right information to many questions. It’s such a blessing to feel that I am not alone during these times.”

Clara R. | New York | Breast Cancer
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Patrick and Kimberly McLaughlin

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Patient Advocate Foundation received its seventh consecutive 4-star rating from Charity Navigator, an honor bestowed on just 3% of all charities evaluated and the highest rating awarded to nonprofit organizations. Charity Navigator is the largest national nonprofit evaluator in the United States, having rated over 8,000 charities, with an aim of accentuating the work of efficient and transparent organizations.

“Attaining a 4-star rating verifies that Patient Advocate Foundation exceeds industry standards and outperforms most charities in their area of work,” Charity Navigator CEO and President, Michael Thatcher says. “This exceptional designation from Charity Navigator sets Patient Advocate Foundation apart from its peers and demonstrates to the public its trustworthiness,” he concludes.

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

“This recognition is testament to the efforts of every member of our staff who work with individual patients every day to alleviate the practical burdens that arise as a result of illness, often impacting access to the most critical and basic healthcare services. Our organization maintains an unwavering commitment to the careful stewardship of the gifts and donations that make their work possible.”

Alan J. Balch, PhD
Patient Advocate Foundation
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