FROM
HOPE FOR
ONE in 1996
TO SERVING
1,076,446 by 2017
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.
WELCOME

“For more than 21 years, PAF’s mission has been to serve one patient at a time by providing meaningful and tangible help based on their individual circumstances. That commitment to personalized assistance remains true today. In 2017, we celebrated the privilege of delivering direct assistance to our millionth patient. Those we have served come from all walks of life, from every state, from both rural and urban communities. The one characteristic they all share is they have reached out to us for help to overcome a barrier to their care for at least one chronic, life-threatening condition.”

In 2017, we celebrated the privilege of delivering direct assistance to our millionth patient. Those we have served come from all walks of life, from every state, from both rural and urban communities. The one characteristic they all share is they have reached out to us for help to overcome a barrier to their care for at least one chronic, life-threatening condition.

This report helps us to tell their stories.

In the past year, PAF helped 148,368 patients and made over 1,475,536 contacts with various stakeholders to resolve patients’ issues. The majority of these patients were low income from small households of two or less. Virtually all were confronting serious financial issues or access issues related to prescribed healthcare services. They turned to PAF seeking practical solutions to their problems.

We offer patients a helping hand to guide them through the world’s most complicated and expensive healthcare system. Along the way, we strive to empower patients to be advocates for themselves and others. When those lessons are applied in their own families and neighborhoods, then they can empower whole communities of individuals.

How do you amplify the power of a single patient? We listen to and gather feedback through two-way dialogue. We learn from that experience and use it to develop educational tools and outreach activities for populations who don’t have easy access to resources. You’ll find many PAF service programs outlined in this report, along with health services research initiatives undertaken in collaboration with like-minded individuals and organizations who share our mission.

With warm regards and best wishes for good health,

Alan J. Balch, PhD
Chief Executive Officer
OVERALL FOUNDATION IMPACT

PAF routinely evaluates the data collected from the patients we assist to gauge the impact of our patient service activities and ensure that our programs and initiatives are aligned with the evolving access needs of our patients as well as our organization’s mission.

SUMMARY OF PAF TOTAL PATIENT CASES AND CONTACTS IN 2017

<table>
<thead>
<tr>
<th>Service Division</th>
<th>Case Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patient Services Division</td>
<td>148,368</td>
</tr>
<tr>
<td>Case Management Division</td>
<td>22,339</td>
</tr>
<tr>
<td>Co-Pay Relief Case</td>
<td>82,973</td>
</tr>
<tr>
<td>Financial Support Programs Case</td>
<td>34,749</td>
</tr>
<tr>
<td>Patient Services Email Helpline Session</td>
<td>8,307</td>
</tr>
</tbody>
</table>

TOTAL PATIENTS SERVED

- Increased 40%

PATIENTS REPORTED

- 490
- 490 different diagnoses

Increases

- 17% increase in the number of diagnoses represented by the patients we helped
- 57% increase in patients served

Served patients in all states

- CA, TX, NY, GA, FL
- Top 5 states served

Financial Support Programs

- 57% increase in patients served
PAF PROFESSIONALS NAVIGATE THE HEALTHCARE SYSTEM ON BEHALF OF TENS OF THOUSANDS OF 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.

PATIENT IMPACT

“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. Before he got involved I did not have the time to take care of my health. 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 thousands of dollars and 12 doctors started sending their bills as well. 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 the insurance company paid the large hospital bill and most of the doctors were paid also. 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 | Breast Cancer
“I was diagnosed with leukemia at age 37 and was lucky that chemotherapy drugs worked for the last six years. Unfortunately they are no longer working, and I am hoping to undergo a bone marrow transplant to save my life. I called PAF for debt crisis help and my case manager was amazing! She was thoughtful, she listened and she helped connect me with a resource that can potentially solve my problem.”

Clarence | Leukemia

“I was diagnosed with multiple myeloma. I went through 4 months of chemotherapy, and received a stem cell procedure. Although I was quite nervous, I did get through the procedure and have been in remission. Patient Advocate Foundation has helped me financially with my expenses. I thank this organization for its help.”

Glenn | Multiple Myeloma

“It is with enormous gratitude that I accept your most generous donation. I am 80 years old and this indeed helped offset some expenses, the cost of which seems to rise daily. I take great comfort in knowing that your group is out there to assist those of us who have had the misfortune to fall ill to the mysteries of cancer. We all hope that an easy and affordable cure is one day discovered. In the meantime, it is the help of friends far and wide who truly help the “cure.” God bless your wonderful organization for all that you do for so many people in need.”

Sylvia | Breast Cancer
“The heart surgery my dad needed was not approved by my family’s insurance provider. A friend recommended PAF and we were quickly partnered with a case manager who walked alongside of our family every step of the way, navigating a complex system my family would have otherwise stumbled through blindly. She stayed with us through 3 heartbreaking insurance denials up until the joyous external review decision that overturned the denial, requiring the insurer to approve the procedure as it was finally deemed medically necessary. What a weight lifted to know my father can have this surgery and get to spend more good years with his wife, kids, and grandkids. This organization understands compassionate advocacy. Thank God for the Patient Advocate Foundation.”

Sarah, daughter of patient | Congestive Heart Failure

“I am writing to say thank you because without your program’s help I would be unable to afford my much-needed medication. I needed to use my award immediately and it was there; in my opinion a lifesaver. I will always be grateful to you and any other organizations that care and understand how much help you provide. You saved me and many others.”

Scott | HIV/AIDS

“One call to PAF saved me thousands of dollars that I was unable to pay. The bills kept coming every day. I hated to check the mail. My social security was no match for these bills. When my wife passed, the hospice staff gave me papers to read that included contacts to help with co-insurance. I started calling numbers and finally got the help I needed from PAF. Thanks a million!”

Sheridan, husband of patient
Lung Cancer

“The concern and care you had for me was so amazing and the response for your financial aid fund came very quickly. This helps so much. Going through the chemo, radiation and back to chemo has been one serious journey and I was just so overwhelmed. Thank you so much for helping my household.”

Jimella | Breast Cancer
“I had a problem with one of the ambulance bills and my PAF case manager encouraged me to pursue an appeal, which I did, and I won. With my case manager’s help I have felt more confident. Thank you.”

Kathleen | Lung Cancer

“I am writing in appreciation for this wonderful foundation that has helped me so much financially and emotionally in my hour of need. I am elderly and hearing impaired. I lost my job; my wife was laid off. I could not afford the co-payment for my medication. Patient Advocate Foundation’s Co-Pay Relief Program came to my rescue and I will never forget that. I am very grateful.”

Murad | Hepatitis B

“I have been taking a medication which was covered by Medicare and was required to change insurers in January, which then required a physician change. My new insurance company denied coverage for the medication, even calling the wrong doctor and closing my appeal. I called PAF and was introduced to a case manager who said she would help me. It was great to speak with someone who sounded professional, understood my situation, and explained what I should do. I am forever grateful for the assistance she provided. Through her organized process, she sent the other parties involved in the appeal hearing all the important additional documents and we subsequently had a positive outcome. If it were not for PAF I do not feel my prescribed medication would have been approved. I am more than satisfied with your service and am deeply appreciative of the assistance I received.”

Karen | Narcolepsy

“I have been a stage 4 breast cancer survivor for almost 4 years. The cost of fighting breast cancer is really high, and any help given is a big blessing. I have so much less stress as a result of the help I am getting from your program. I can’t say thank you enough!”

Priscilla | Breast Cancer
**Case Management**

**2 NEW PROGRAMS Launched**

- Genomic Testing Support CareLine
- Metastatic Breast Cancer Partnership for Access to Clinical Trials

**SUMMARY OF PAF CASE MANAGEMENT PATIENT CASES AND CONTACTS IN 2017**

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total PAF Case Management Case Count</td>
<td>22,339</td>
</tr>
<tr>
<td>Total Case Management Closed Cases</td>
<td>21,879</td>
</tr>
<tr>
<td>Unique Case Management Patient Issues</td>
<td>44,875</td>
</tr>
<tr>
<td>Total PAF Case Management Contacts</td>
<td>417,251</td>
</tr>
<tr>
<td>Average Contacts Per Case</td>
<td>19.07</td>
</tr>
</tbody>
</table>

**TOP ISSUES Faced by Patients Seeking Case Management Help**

- 41% Insurance Issues
- 27% Debt Crisis/Cost-of-Living Issues
- 10% Uninsured Issues

**417,251 CONTACTS MADE WHILE RESOLVING CASES**

**CASE MANAGEMENT**

- **Total PAF Case Management Case Count**: 22,339
- **Total Case Management Closed Cases**: 21,879
- **Unique Case Management Patient Issues**: 44,875
- **Total PAF Case Management Contacts**: 417,251
- **Average Contacts Per Case**: 19.07

**TOP ISSUES**

- 41% Insurance Issues
- 27% Debt Crisis/Cost-of-Living Issues
- 10% Uninsured Issues

**AVERAGE MILEAGE TRAVELED FOR TREATMENT**

- **21.8 MIles**: ALL Cases
- **19.3 MILES**: Cases WITH NO Travel Issue
- **26.5 MILES**: Cases WITH A Travel Issue

**Case Management**

- **13% more patients served**
- **23% more issues resolved**  
  (compared to 2016)
### 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>1.66%</td>
</tr>
<tr>
<td>19 to 25</td>
<td>4.57%</td>
</tr>
<tr>
<td>26 to 35</td>
<td>12.49%</td>
</tr>
<tr>
<td>36 to 45</td>
<td>11.55%</td>
</tr>
<tr>
<td>46 to 55</td>
<td>19.02%</td>
</tr>
<tr>
<td>56 to 65</td>
<td>25.74%</td>
</tr>
<tr>
<td>Over 65</td>
<td>24.97%</td>
</tr>
</tbody>
</table>

#### Ethnicity

<table>
<thead>
<tr>
<th>Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>African American</td>
<td>20.28%</td>
</tr>
<tr>
<td>American Indian/Alaska Native</td>
<td>0.59%</td>
</tr>
<tr>
<td>Asian</td>
<td>2.90%</td>
</tr>
<tr>
<td>Blended Race</td>
<td>1.58%</td>
</tr>
<tr>
<td>Caribbean Islander</td>
<td>0.45%</td>
</tr>
<tr>
<td>Caucasian</td>
<td>62.51%</td>
</tr>
<tr>
<td>Hispanic/Latino</td>
<td>10.90%</td>
</tr>
<tr>
<td>Middle Eastern</td>
<td>0.57%</td>
</tr>
<tr>
<td>Native Hawaiian/Other Pacific Islander</td>
<td>0.23%</td>
</tr>
</tbody>
</table>

#### Employment Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Disabled</td>
<td>24.13%</td>
</tr>
<tr>
<td>Employed</td>
<td>23.09%</td>
</tr>
<tr>
<td>Full Time Student</td>
<td>1.52%</td>
</tr>
<tr>
<td>Homemaker</td>
<td>0.95%</td>
</tr>
<tr>
<td>Retired</td>
<td>28.08%</td>
</tr>
<tr>
<td>Self-employed</td>
<td>2.67%</td>
</tr>
<tr>
<td>Unemployed</td>
<td>19.57%</td>
</tr>
</tbody>
</table>

#### Insurance Status

<table>
<thead>
<tr>
<th>Status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commercially-Insured</td>
<td>26.84%</td>
</tr>
<tr>
<td>Marketplace Exchange</td>
<td>5.33%</td>
</tr>
<tr>
<td>Medicaid</td>
<td>12.65%</td>
</tr>
<tr>
<td>Medicare</td>
<td>41.70%</td>
</tr>
<tr>
<td>Military Benefits</td>
<td>0.98%</td>
</tr>
<tr>
<td>Uninsured</td>
<td>12.50%</td>
</tr>
</tbody>
</table>

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**Negotiated**

$24,607,904 in DEBT RELIEF on behalf of patients

**Patients Reported**

490 DIFFERENT DIAGNOSES
CASE MANAGEMENT

In 2017, PAF's case management division operated 21 patient support programs, closed 21,879 cases and provided assistance for 44,875 unique issues. All data presented are derived from the closed cases.

The case management division served an increased number of patients who reached out for help through the general toll-free hotline and e-mail portals. Data reflects that the composition of PAF’s patient population experienced further diversification as a result, serving 490 different diagnoses (an increase of 17% since 2016). More patients from medically underserved populations were assisted, including African Americans, Hispanic/Latinos, Caribbean Islanders and low socio-economic individuals. There was a 16.3% increase in the number of cancer patients served, a 14.1% increase in the number of cardiovascular patients served and an increase of 19.2% in the number of patients reporting other chronic and/or debilitating conditions.

More than 69% of patients served through this program had an annual household income of $35,000 or less, and almost 20% categorized their employment status as unemployed. Nearly one in four (24%) was disabled. PAF’s service to seniors swelled to its greatest percentage ever with almost 25% of patients over age 65, 28% retired and 41% of patients covered by Medicare.

PAF also continued to serve a significant number of uninsured patients (12%). A closer look at the uninsured population revealed dramatic pockets of disparities that do not exist in other PAF insurance categories; for instance, over 50% of uninsured patients were unemployed and 26.3% were self-employed, an increase of 13.3% from 2016. These metrics are particularly concerning as we see the reduction in available social safety net services that previously helped support these low income and underinsured Americans.

The top three issue categories for patients seeking case management assistance were Insurance Issues at 40.8%, Debt Crisis/Cost of Living Issues at 26.8% and Uninsured Issues at 9.5%.

TOP 5 SPECIFIC CASE MANAGEMENT ISSUES

<table>
<thead>
<tr>
<th>Issue Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Inability to Afford Transportation Expenses</td>
<td>9.5%</td>
</tr>
<tr>
<td>Financial Assistance for Medications</td>
<td>5.7%</td>
</tr>
<tr>
<td>Inability to Afford Rent/Mortgage</td>
<td>5.5%</td>
</tr>
<tr>
<td>Inability to Afford Utility/Shut Off Notice</td>
<td>4.7%</td>
</tr>
<tr>
<td>Financial Assistance for Medicare Cost Share</td>
<td>4.3%</td>
</tr>
</tbody>
</table>

PAF also documents the various resolutions achieved for patients in response to issues. The top three resolution types achieved in 2017 closely aligned with the issues, with Insurance Resolutions at 40.4%, Debt Crisis/Cost of Living Resolutions at 29.2% and Uninsured Resolutions at 8.2%.

The data below provides further insight into the specific resolutions obtained on behalf of patients.

TOP RESOLUTIONS Achieved by Case Managers

<table>
<thead>
<tr>
<th>Resolution</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Facilitated Financial Assistance for Medication</td>
<td>10.3%</td>
</tr>
<tr>
<td>Secured Free Transportation Assistance</td>
<td>10.1%</td>
</tr>
<tr>
<td>Negotiated Discounted Payment Plan</td>
<td>5.1%</td>
</tr>
<tr>
<td>Facilitated Rental/Mortgage Payment Relief</td>
<td>5.1%</td>
</tr>
<tr>
<td>Obtained Full/Partial Charity Care for the Underinsured</td>
<td>4.5%</td>
</tr>
<tr>
<td>Facilitated Utility/Phone Relief</td>
<td>4.5%</td>
</tr>
<tr>
<td>Educated on General Benefit/Coverage Questions</td>
<td>4.1%</td>
</tr>
<tr>
<td>Offset Cost Through Alternative Assistance</td>
<td>3.5%</td>
</tr>
<tr>
<td>Provided Guidance for Disability Process</td>
<td>3.3%</td>
</tr>
</tbody>
</table>

PAF is committed to helping individual patients overcome one healthcare barrier at a time, yet we also amplify the power of a single patient experience through the development of impactful educational materials and the implementation of research initiatives that inform healthcare system transformation.
Through our Financial Support Programs, the Patient Advocate Foundation provides small grants to patients for a broad range of needs as well as partnering with other non-profit charities to manage administrative aspects of their financial assistance programs.

These small-grant programs provide an invaluable source of support for non-medical needs, such as transportation costs, housing, lodging and/or utility expenses and nutritional needs, that present access barriers for financially vulnerable patients.

PAF operated seven financial support programs in 2017, approving 34,749 patients for assistance. All grants are awarded on a first-come, first-served basis to patients who meet the medical and financial qualifications.

The Financial Support Program staff responded to 201,979 calls and processed 105,956 grant payments on behalf of patients, an increase of 44% over 2016. PAF implemented a real-time automated income verification process, which reduces the administrative burden placed on patients and provides them with an immediate response to assistance applications.

“Thank you for the transportation financial aid you assisted me with. It was much needed and will be used to help me get to doctors’ appointments.”

Rosa | Multiple Myeloma
Co-Pay Relief Program

CO-PAY RELIEF PROGRAM

CPR SERVICE LEVEL PERFORMANCE

<table>
<thead>
<tr>
<th>Year</th>
<th>Patients Approved</th>
<th>Incoming Calls Handled</th>
<th>Grant Payments Processed</th>
<th>Grant Payment Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>2017</td>
<td>82,973</td>
<td>251,218</td>
<td>637,264</td>
<td>$205,214,685</td>
</tr>
<tr>
<td>2016</td>
<td>49,760</td>
<td>154,329</td>
<td>184,880</td>
<td>$85,782,071</td>
</tr>
</tbody>
</table>

CPR PROVIDED MORE THAN $200 MILLION in assistance to patients

CPR PATIENTS SERVED Increased 66%

CPR CAN SUPPORT All medications prescribed to treat and manage a disease

APPROVED DISEASE FUNDS (as of December 2017)

- Alpha-1 Antitrypsin Deficiency (FF)
- Alzheimer’s Disease (FF)
- Amyotrophic Lateral Sclerosis (ALS)
- Ankylosing Spondylitis (FF)
- Asthma (FF)
- Bladder Cancer* (FF)
- Brain Cancer
- Breast Cancer*
- Cancer Genetic and Genomic Testing Fund
- Cardiac Arrhythmias (FF)
- Cervical Cancer*
- COPD (FF)
- Coronary Artery Disease (CAD) (FF)
- Crohn’s Disease (FF)
- Cystic Fibrosis
- Electrolyte Imbalance*
- Epilepsy (FF)
- Head & Neck Cancer
- Heart Failure (FF)
- Hepatitis B*
- Hepatitis C*
- Hepatocellular Carcinoma / Liver Cancer (FF)
- HIV, AIDS and Prevention*
- Homozygous Familial Hypercholesterolemia*
- Huntington’s Disease
- Hyperlipidemia
- Inherited or Acquired Lipodystrophy*
- Lupus (FF)
- Melanoma (FF)
- Metastatic Bladder Cancer (FF)
- Metastatic Breast Cancer*
- Metastatic Colorectal Cancer* (FF)
- Metastatic Gastric Cancer*
- Metastatic Melanoma (FF)
- Metastatic Prostate Cancer* (FF)
- Multiple Myeloma*
- Multiple Sclerosis* (FF)
- Muscular Dystrophy
- Myelodysplastic Syndromes* (FF)
- Myeloproliferative Disorder (FF)
- Narcolepsy
- Neoplasm Related Pain
- Non-Small Cell Lung Cancers* (FF)
- Osteoporosis*
- Ovarian Cancer*
- Pancreatic Cancer (FF)
- Parkinson’s Disease (FF)
- Periodic Paralysis*
- Peripheral Vascular Disease (FF)
- Prostate Cancer* (FF)
- Psoriatic Arthritis (FF)
- Pulmonary Fibrosis (FF)
- Pulmonary Hypertension* (FF)
- Renal Cell Carcinoma*
- Rheumatoid Arthritis
- Sarcoma of the Bone
- Soft Tissue Sarcoma
- Stroke (FF)
- Testicular Cancer
- Thyroid Cancer (FF)
- Ulcerative Colitis (FF)
- Virology Testing Fund

(*) Denotes silos that are currently operational and serving new and/or existing patients.
(FF) Denotes funds for patients with Medicare, Medicaid or Military Benefits only.
Patient Advocate Foundation’s Co-Pay Relief (CPR) program can provide direct financial assistance to medically and financially qualified patients with co-payments, co-insurance and/or deductibles required for any medications prescribed to treat and/or manage the patient’s condition, including therapeutic, supportive and generic medications. CPR can assist with co-payments, co-insurance and/or deductibles related to the administration of prescribed medications and office visit expenses on the day of treatment.

Launched in April of 2004, CPR is the second oldest Office of Inspector General (OIG)-approved co-pay program in the country and was introduced to address a growing need for this type of financial support as identified through PAF’s case management data.

In 2017, CPR’s service to patients increased significantly, with the program approving 82,973 patients, 66% more than the previous year. Through 23 individual disease funds, the program provided more than $205,214,685 to patients in need, more than doubling the assistance provided in 2016. Our dedicated CPR staff handled 251,218 calls (a 62% increase) and processed 637,264 grant payments (a 244% increase).

This level of service was made possible through the implementation of sophisticated automated systems, technology upgrades and self-service tools that allow patients and healthcare providers to autonomously interact with the program. These enhancements include:

- Electronic income verification
- Instant eligibility decisions
- Web-based portals offering on-demand assistance
- Virtual pharmacy card option
- Electronic payments

The disease areas served by CPR in 2017 include Bladder Cancer, Breast Cancer, Cervical Cancer, Electrolyte Imbalance, Hepatitis B, Hepatitis C, HIV, AIDS and Prevention, Homozygous Familial Hypercholesterolemia, Inherited or Acquired Lipodystrophy, Metastatic Breast Cancer, Metastatic Colorectal Cancer, Metastatic Gastric Cancer, Metastatic Prostate Cancer, Multiple Myeloma, Multiple Sclerosis, Myelodysplastic Syndrome, Non-Small Cell Lung Cancers, Osteoporosis, Ovarian Cancer, Periodic Paralysis, Prostate Cancer, Pulmonary Hypertension, Renal Cell Carcinoma.

PAF proactively determines which funds to establish for its copay assistance program by conducting independent research about the barriers patients are facing in different disease areas. Where there is evidence of need based on sources like PAF’s patient data or government reports, PAF then initiates a rigorous process of defining and approving a particular fund and its eligibility requirements based on standardized criteria. See list on page 14 for all the funds PAF either currently operates or those that are approved for operation but for which we have yet to secure funding.

“I was greatly relieved to hear that costs for my continuing medication addressing my cancer were going to be covered by your foundation. Such costs could bankrupt us within a year or two. It is simply wonderful that such a resource is available for those with serious conditions.”

David | Multiple Myeloma
PATIENT EDUCATION & EMPOWERMENT

2017 EDUCATIONAL & EMPOWERMENT PROJECTS

<table>
<thead>
<tr>
<th>METASTATIC BREAST CANCER PARTNERSHIP</th>
<th>CARDIOVASCULAR PATIENT EMPOWERMENT PROJECT &amp; STAKEHOLDER COALITION</th>
<th>PATIENT ACTION COUNCIL</th>
</tr>
</thead>
<tbody>
<tr>
<td>for Access to Clinical Trials</td>
<td>Making Sense of What Matters Drug Formulary</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COVERAGE ACCESS GUIDE</th>
<th>PATIENT EMPOWERMENT SERIES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engaging the Mobile User</td>
<td></td>
</tr>
</tbody>
</table>

NATIONAL UN and UNDERinsured RESOURCE DIRECTORIES

26,276 COMPLETED user searches with 1,083,367 RESOURCES MATCHED to users’ needs

Patient Empowerment Series LIVE AND ON-DEMAND

97% of survey respondents rate the sessions as

- INFORMATIVE
- VERY INFORMATIVE

17 ON-DEMAND SESSIONS

Available in the Patient Empowerment Series Digital Library
PAF partnered with the Avon Breast Cancer Crusade to offer the **Metastatic Breast Cancer Partnership for Access to Clinical Trials**, designed to increase awareness and participation in clinical trials by metastatic breast cancer patients. This is done through patient education and capacity-building services for peer organizations who share our goal to overcome factors contributing to low clinical trial enrollment by members of disparate populations. The project delivered the newly created publication “Clinical Trials: What Case Managers Want You to Know,” and drove two partnerships with BreastCancerTrials and the Dorothy G. Hoefler Comprehensive Breast Center. These programs address barriers associated with clinical trial participation for patients who have a trial match.

Ideally, patients would conduct a detailed formulary review on an annual basis to evaluate coverage levels for their individual medications, but most have difficulty doing so. PAF’s Patient Action Council supported the development of an educational campaign, **Making Sense of What Matters-Drug Formulary**, which provides impactful educational materials, including publications, webinars, sharable graphics and other tools that improve consumer understanding of the medication costs associated with their insurance coverage. This effort goes far beyond a cursory look at drug tiers and formularies to uncover potentially vulnerable coverage areas.

With mobile updates to **PAF’s Coverage Access Guide**, the free, easy-to-use educational guide is now available for use on tablets and phones through the App Store and Android Google Play Store. This mobile app has topics geared to help both novice and experienced patients prevent common obstacles and enhance their overall healthcare experience. The Guide’s advice spans the patient’s full journey with health insurance, from initial plan selection to using plan benefits.

The **Patient Empowerment (PES) Series** features practical advice on the most frequently reported access barriers and/or educational concerns identified through PAF’s years of delivering case management services. This educational series features live and on-demand webinars, interactive web-based resource tools and access to the comprehensive PAF resource library.
Health Equity & Community Engagement

The Journey of 1000 Miles

Nearly 2,335 limited-resource individuals or healthcare providers were introduced to PAF services and resources.

28,620 miles traveled by Health Equity team for outreach events.

6 ongoing health equity initiatives:

- African-American Breast Cancer Outreach
- Latina Breast Cancer Outreach
- SelfMade Health Network
- West Virginia Lung Cancer Project
- #BeAGift: Diversity in Clinical Trials
- Lupus Initiative (in partnership with American College of Rheumatology)

West Virginia’s five Medicaid managed care organizations (MMCO)

3 MMCOs have been linked to the West Virginia Lung Cancer Project

2 MMCOs have been trained on lung cancer screening eligibility protocol

1 MMCO fully implemented the protocol in 2017

Selected as one of three national networks to implement “Inside Knowledge” to increase awareness of gynecologic cancers.
PAF’s focus on achieving health equity is uniquely designed to link communities across the country experiencing high rates of premature deaths from specific chronic/infectious diseases to the organization’s platform of services and support. This intentional work is aligned with our strategic commitment to link limited resourced populations to resources to help them better achieve the quality of life they desire while living with a chronic, life-threatening or debilitating condition.

HEALTH EQUITY INITIATIVE

PAF’s proactive approach to seeking out disparate, underserved communities, identifying key stakeholders and assessing resource gaps are key elements to the community engagement strategy. This strategy builds on existing resources within the communities and seeks to forge new partnerships where the resources available through PAF and its network of partners complement and amplify local efforts.

Nearly 2,335 limited-resource individuals, or healthcare providers who serve these populations, were introduced to PAF services and resources through a team of dedicated health equity professionals who traveled more than 28,620 miles in 2017 to attend a series of national and local outreach events.

IMPROVING LUNG CANCER OUTCOMES ACROSS WEST VIRGINIA

West Virginia has the highest lung cancer mortality rate in the country. One primary factor contributing to this mortality rate is late-stage diagnosis. To address this disparity, PAF joined forces with local West Virginia stakeholders to launch the West Virginia Lung Cancer Project. This project is designed to link individuals with lung cancer to PAF’s comprehensive case management platform, providing direct assistance with resolution of financial and logistical barriers to care, including access to lung cancer screening.

West Virginia’s five Medicaid Managed Care Organizations (MMCO), and the providers within these networks, are critical to project goals which link financially vulnerable populations to PAF services. Through its local West Virginia Advisory Council, PAF successfully developed and implemented a lung cancer screening eligibility protocol used by local MMCOs to proactively identify, connect and link appropriate Medicaid beneficiaries to lung cancer screening.
The aim of the state initiatives was to better understand the challenges experienced by populations with low SES characteristics; identify new strategies for inclusion and promotion and tobacco cessation; and uncover emerging strategies to improve breast cancer screening among African-American women and lung cancer early detection among Caucasian males in blue collar industries.

Initial findings from these pilot projects were selected for poster and/or oral presentations at the 2017 CDC National Conference on Tobacco or Health and 2017 CDC National Cancer Conference.
**SPECIAL EVENTS**

**PATIENT CONGRESS**

PAF hosted its 18th Annual Patient Congress (PC) in June of 2017, in Washington, DC. This annual training and convening event supports a volunteer advocate network while empowering patients and their caregivers to become knowledgeable and skilled advocates in their communities and at the national level.

This year’s interactive education program included a “Narrative Medicine Workshop” to educate advocates about effective storytelling, community event training and certification provided by guest faculty from Common Practice; and education on opportunities to available training in palliative care with NPAF.

To learn more about Patient Congress, please visit npaf.org/patient-congress.

**PROMISE OF HOPE AFFAIR**

Patient Advocate Foundation held its 16th Annual A Promise of Hope Affair on February 25, 2017, at the Newport News Marriott at City Center, drawing over 330 guests from the Hampton Roads area and from across the country. The theme was a Masquerade Ball & Casino Night in the black-tie event.

Emmy award-winning broadcast journalist Barbara Ciara, WTKR Channel 3, served as the Mistress of Ceremonies for the 15th consecutive year. Guests enjoyed a welcome reception, seated dinner, engaging speakers, both a silent and live auction, music, dancing and casino games, with proceeds supporting PAF patient service programs and the Scholarship for Survivors program.

To learn more about supporting or attending A Promise of Hope Affair, please visit promiseofhope.net.

**WE SUPPORT OUR HOMETOWN**

On October 6th staff members from PAF took part in the CrawlinCrab 5K/Half Marathon in Hampton, VA, presented by Bon Secours in Motion. “Team PAF” members each obtained sponsors for their participation in the run, raising over $7,500 for PAF’s Scholarship for Survivors program.
SCHOLARSHIP FOR SURVIVORS

PAF’s Scholarship for Survivors program provides academic scholarship support to legal residents of the United States who are under the age of 25 and have been diagnosed with or treated for cancer, or a chronic or life-threatening, debilitating disease within the past five years. These students have, despite their health challenges, excelled academically, served their community and desire to pursue or complete a secondary education.

Selected applicants receive $3,000 annually up to four consecutive years, if they continue to meet the program guidelines. Applications are accepted each year.

To date, PAF has awarded 83 scholarships totaling over $506,000; from these, 44 scholarship recipients have achieved fully degreed graduation and 12 are still pursuing their course of study.

To learn more about supporting the scholarship program, or to apply for a Patient Advocate Foundation scholarship, please visit patientadvocate.org/help.php.

BREAKAWAY FROM CANCER

The largest cycling event in America, the Amgen Tour of California, is a multi-stage cycling road race that challenges the world’s top professional cycling teams to compete along a demanding course. Amgen’s Breakaway from Cancer aims to raise awareness of the comprehensive array of resources available to cancer patients — from prevention to education and support to financial assistance and survivorship.

PAF is one of four national non-profit organizations which make up the Breakaway from Cancer (BFC) initiative. Representatives of each partner organization follow the Amgen Tour, participating in the Lifestyle Festival presented at each ending stage to educate residents about services for cancer patients and their caregivers.

PAF CEO Alan Balch, EVP of Strategic Patient Solutions Alan Richardson and PAF senior case manager Brendan Biety represented PAF at select 2017 Tour of California events where the public and patients had opportunities to learn more about PAF and the services we provide. BFC began in Sacramento on May 14th, passed through Modesto, San Jose, Pismo Beach, Morrow Bay, Santa Barbara, Santa Clarita, Ontario, Mt. Baldy, Big Bear Lake and Mountain High, and ended on May 20th in Pasadena, where George Bennett beat out 135 other bicyclists to cross the finish line.

To learn more about the BFC event, please visit patientadvocate.org/bfc.php.
WE HELP FEED OUR HOMETOWN NEIGHBORS

PAF partners with the Virginia Peninsula Foodbank annually to support families in the Hampton Roads area that are food insecure. 2017 was the 8th consecutive year that PAF sponsored a food drive in support of the Peninsula Foodbank and staff members donated $1,486 and 1,628 food items, far exceeding this year’s donation goal.

In addition, PAF executive leaders volunteer every December to work at the Foodbank, sorting donations, stocking shelves and preparing individual food bags that fulfill bulk food orders from various distribution sites throughout the region, from churches to senior centers.

“I am a first-time mother to a beautiful 2-month-old baby boy. While most women would be celebrating this new journey in life and enjoying their child, my days consist of doctor’s visits, tests and uncertainty as I was diagnosed with invasive ductal cancer. My doctor said that I’m the youngest patient he’s seen with this diagnosis. I’m scared and in disbelief. I would like to thank the Patient Advocate Foundation for the grant that I was awarded through your financial aid fund, which I plan to use towards my living expenses.”

Fredericka | Breast Cancer
Health Services Research Initiatives

Impact of Illness on Employment

Roughly 900 respondents to a 2017 PAF survey indicated the significant and various ways illness impacted the employment status of those served by PAF.

- 27% were already retired or not employed
- 25% were unable to perform at their normal performance levels
- 21% lost income due to the inability to work full time
- 12% lost their job due to the illness
- Only 8% said their illness had minimal impact on the job
- 4% said they were unemployed and finding it difficult to find a job due to the illness
- 3% were not sure or did not know

Of those PAF patients who reported an impact on their employment due to illness, 34% indicated a direct impact on their insurance coverage as a result.

- 54% had no impact on the insurance status
- 25% lost insurance but eventually gained coverage
- 12% not sure/don’t know
- 5% lost insurance and are still uninsured
- 4% lost insurance, but currently have COBRA coverage

Social Safety Net Services Provided in the Past 12 Months

83% of roughly 900 respondents in a 2017 PAF survey indicated they had sought and received assistance from a federal or state-run program. The top 4 sources of support are listed below.*

- 19% Social Security Disability Insurance (SSDI)
- 12% Medicaid
- 8% Supplemental Nutrition Assistance Program (SNAP)
- 5% Low Income Home Energy Assistance Program (LIHEAP)

89% of roughly 900 patients in a 2017 survey indicated they had sought and received assistance from a non-governmental social support or charity program. The top 3 sources of support are listed below.*

- 23% Financial Assistance from a Non-Profit Charity
- 15% Free Medication from a Drug Company
- 12% Help with Transportation/Transportation to Treatment

*Multiple response selections were allowed for these questions (i.e. select all that apply)
The Health Services Research Program translates the issues or concerns identified in PAF’s direct patient services data into targeted survey projects that yield key information for social justice, health equity and healthcare transformation efforts.

Data collected from PAF survey projects yield insights into the types of programs and services that are most important to patients. The goal is to improve when and how we connect people to these resources, explaining the need to preserve, expand and enhance person-centered care.

2017 RESEARCH PROJECTS:

- Securing the Safety Net: Evaluation of Programs Used by Low Income Patients to Address Financial and Economic Burdens
- Consumer Clarity Patient Value Survey for Prostate Cancer
- Patient Priorities for Healthcare Coverage (IRB-approved research protocol)

SECURING THE SAFETY NET:
Evaluation of Programs Used by Low Income Patients to Address Financial and Economic Burdens

Social safety net services are critical components in helping prevent low-income and chronically ill patients, like many of those served by PAF, from falling further into debt.

The survey captured patient perspectives and experiences from those who had received treatment in the last 12 months with safety net, charity and/or social service programs, as well as their impact on patients and families coping with distressing financial or material hardships that may interfere with their well-being. Surveys were sent via email and included a link to a secure online portal. Roughly 900 patients who received PAF services during 2016 and 2017 participated in this project.

One significant finding from the survey is how much of an impact an illness has on employment, with most patients reporting loss of income, reduction in performance or complete loss of employment. And because employment is the gateway to insurance (and therefore access) for many low-income patients, it is also common for those same patients to report a disruption in their insurance coverage attributed to the disruption in their employment.

Because illness and treatment commonly interfere with a patient’s ability to work as well as their ability to maintain insurance coverages, access to safety net resources becomes a means by which patients can continue treatment and avoid financial ruin. PAF patients commonly rely on a variety of government and charitable programs.

Because of the safety net or social service support received (federal, state or charitable), respondents were able to:

- Avoid extreme financial distress..................18%
- Receive what my doctor considers to be the best treatment for me.........................16%
- Receive what I consider to be the best treatment for me.......................................14%
- Stay on my disease-related therapy ..........12%
- Afford necessities (food, housing, transportation) ..................10%
- Maintain my ability to do normal daily activities .................................................9%

*Multiple response selections were allowed for these questions (i.e. select all that apply)
### SUMMARY OF TOTAL PATIENT IMPACT IN FISCAL YEAR 2016/17

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Patient Services Division Case Count</td>
<td>137,888</td>
</tr>
<tr>
<td>Total Case Management Division Case Count</td>
<td>20,008</td>
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<tr>
<td>Total Co-Pay Relief Case Count</td>
<td>72,740</td>
</tr>
<tr>
<td>Total Financial Support Programs Case Count</td>
<td>32,827</td>
</tr>
<tr>
<td>Total Patient Services Email Helpline Session Count</td>
<td>12,313</td>
</tr>
<tr>
<td>Total Patient Services Division Case Contacts</td>
<td>1,481,636</td>
</tr>
</tbody>
</table>

### SUMMARY OF PAF CASE MANAGEMENT IMPACT FISCAL YEAR 2016/17

**PATIENT CASES AND CONTACTS**

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total PAF Case Management Case Count</td>
<td>19,806</td>
</tr>
<tr>
<td>Unique Case Management Patient Issues</td>
<td>42,275</td>
</tr>
<tr>
<td>Total PAF Case Management Contacts</td>
<td>414,866</td>
</tr>
<tr>
<td>Average Contacts per Case</td>
<td>20.95</td>
</tr>
</tbody>
</table>

*To ensure the greatest degree of accuracy, the case management data presented above is derived from closed cases.*
## Patient Advocate Foundation
### Statements of Financial Position
#### June 30, 2017 and 2016

### ASSETS

<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current assets:</strong></td>
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<td></td>
</tr>
<tr>
<td>General operating cash and cash equivalents</td>
<td>$18,676,495</td>
<td>$9,949,251</td>
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<tr>
<td>Restricted cash and cash equivalents</td>
<td>202,912,026</td>
<td>163,016,738</td>
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<tr>
<td>Unconditional promises to give</td>
<td>450,813</td>
<td>1,368,354</td>
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<td>Service contract receivable</td>
<td>656,282</td>
<td>317,514</td>
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<td>Due from National Patient Advocate</td>
<td>7,599</td>
<td>10,058</td>
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<td>Investments and cash equivalents</td>
<td>1,996,636</td>
<td>1,486,242</td>
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<tr>
<td>Inventories</td>
<td>27,249</td>
<td>29,290</td>
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<td>Prepaid expenses</td>
<td>591,597</td>
<td>459,093</td>
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<td><strong>Total current assets</strong></td>
<td>225,318,697</td>
<td>176,636,540</td>
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<td><strong>Property and equipment, net</strong></td>
<td>5,042,401</td>
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<td><strong>Other assets:</strong></td>
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<tr>
<td>Refundable deposits</td>
<td>50,331</td>
<td>50,331</td>
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<tr>
<td><strong>Total assets</strong></td>
<td>$230,411,429</td>
<td>$182,470,919</td>
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</table>

### LIABILITIES AND NET ASSETS

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<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Current liabilities:</strong></td>
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<tr>
<td>Accounts payable and accrued expenses</td>
<td>$4,220,674</td>
<td>$1,129,492</td>
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<tr>
<td>Deferred revenue</td>
<td>16,448,938</td>
<td>9,461,776</td>
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<td>Accrued vacation leave</td>
<td>150,269</td>
<td>214,117</td>
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<td>Current portion of long-term debt</td>
<td>-</td>
<td>246,180</td>
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<tr>
<td>Current portion of obligation under capital lease</td>
<td>-</td>
<td>73,912</td>
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<tr>
<td><strong>Total current liabilities</strong></td>
<td>20,819,881</td>
<td>11,125,477</td>
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<td><strong>Long-term liabilities:</strong></td>
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<tr>
<td>Long-term debt, less current portion</td>
<td>-</td>
<td>816,727</td>
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<tr>
<td>Obligation under capital lease, less current portion</td>
<td>-</td>
<td>62,755</td>
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<tr>
<td>Postretirement benefits liability</td>
<td>2,184,558</td>
<td>2,133,593</td>
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<tr>
<td>Other liabilities</td>
<td>75,111</td>
<td>110,050</td>
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<tr>
<td><strong>Total liabilities</strong></td>
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<tr>
<td><strong>Unrestricted</strong></td>
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<tr>
<td>Unrestricted</td>
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<td>3,829,386</td>
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<tr>
<td>Unrestricted, board designated</td>
<td>1,996,636</td>
<td>1,486,242</td>
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<tr>
<td><strong>Total unrestricted net assets</strong></td>
<td>7,419,535</td>
<td>5,315,628</td>
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<tr>
<td><strong>Temporarily restricted</strong></td>
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<tr>
<td>Temporarily restricted</td>
<td>199,912,344</td>
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<td><strong>Total net assets</strong></td>
<td>207,331,879</td>
<td>168,222,317</td>
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<table>
<thead>
<tr>
<th></th>
<th>2017</th>
<th>2016</th>
</tr>
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<tbody>
<tr>
<td><strong>Total net assets</strong></td>
<td>$230,411,429</td>
<td>$182,470,919</td>
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## Patient Advocate Foundation
### Statements of Activities
### Years Ended June 30, 2017 and 2016

<table>
<thead>
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<th>2016</th>
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<tr>
<td></td>
<td>Unrestricted</td>
<td>Board</td>
<td>Total</td>
<td>Temporarily</td>
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<tr>
<td></td>
<td>Designated</td>
<td>Unrestricted</td>
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<td>Restricted</td>
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<tr>
<td>Revenues, gains and</td>
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<tr>
<td>other support:</td>
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</tr>
<tr>
<td>Contributions:</td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Grants</td>
<td>$ 5,733,646</td>
<td>$ -</td>
<td>$ 5,733,646</td>
<td>$ 202,298,540</td>
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<tr>
<td>Private and public</td>
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<tr>
<td>donations</td>
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<td></td>
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<tr>
<td>Donated services</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>and materials</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Program Administration</td>
<td>15,491,426</td>
<td>$ -</td>
<td>15,491,426</td>
<td>$ -</td>
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<tr>
<td>Patient Congress</td>
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<tr>
<td>Promise of Hope</td>
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<tr>
<td>Miscellaneous income (loss)</td>
<td>210,609</td>
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<td>210,609</td>
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<tr>
<td>Investment income</td>
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<td>Satisfaction of</td>
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<td>gains and other</td>
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<tr>
<td></td>
<td>187,661,202</td>
<td>510,394</td>
<td>188,171,596</td>
<td>37,005,655</td>
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<tr>
<td>Expenses and losses:</td>
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<td>Program services:</td>
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<tr>
<td>Patient/educational</td>
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<tr>
<td>services</td>
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<td>Financial Aid</td>
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<td>Supporting services:</td>
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<td>general</td>
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<tr>
<td>Total expenses</td>
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<tr>
<td></td>
<td>186,252,314</td>
<td>510,394</td>
<td>186,762,708</td>
<td>37,005,655</td>
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<tr>
<td>Change in net assets</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>before postretirement benefit charges</td>
<td>$ 1,408,888</td>
<td>$ 510,394</td>
<td>$ 1,919,282</td>
<td>$ 37,005,655</td>
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<tr>
<td>other than periodic</td>
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<td></td>
</tr>
<tr>
<td>cost</td>
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<tr>
<td>Postretirement</td>
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<td></td>
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<td></td>
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<tr>
<td>benefit charges</td>
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<tr>
<td>other than periodic</td>
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<td>cost</td>
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<tr>
<td>Change in net assets</td>
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<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Net assets, beginning of year</td>
<td>$ 3,829,386</td>
<td>$ 1,486,242</td>
<td>$ 5,315,628</td>
<td>$ 162,906,689</td>
</tr>
<tr>
<td>Net assets, end of year</td>
<td>$ 5,422,899</td>
<td>$ 1,996,636</td>
<td>$ 7,419,535</td>
<td>$ 199,912,344</td>
</tr>
</tbody>
</table>
**ANNUAL IMPACT REPORT 2017**

**COMBINED REVENUE**

- Program Grants - $208,032,186
- Program Administration - $15,491,426
- Interest - $1,124,158
- Event Revenue - $294,445
- Gifts, Contributions & In-Kind Service - $235,036
- TOTAL - $225,177,251

**COMBINED FUNCTIONAL EXPENSES**

- Program Services - $183,165,221
- Management & General - $2,111,634
- Fundraising - $975,459
- TOTAL - $186,252,314
3 Bowls of Color
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AEG Cycling LLC
AEG Presents LLC
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"I would like to thank the Patient Advocate Foundation for providing excellent support to cancer survivors in our community. The cancer survivors we assist in our clinic have multifaceted needs – everything from trying to stay on top of payment for their medical bills and medications to returning to work after treatment. Our patients may suddenly find themselves facing mounting debt because they are unable to work due to their illness and therefore become under or uninsured. The staff from PAF has stepped up to provide excellent information and support to all involved, including those of us who assist the patients and families with their journey in the world of cancer.”

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

GUIDESTAR’S PLATINUM SEAL OF TRANSPARENCY

Patient Advocate Foundation earned the GuideStar’s Platinum Seal of Transparency, the newest and highest level of recognition offered by the world’s largest source of non-profit information.

This platinum rating recognizes transparent reporting focused on progress measurements and results which extend beyond financial ratios.

ACKNOWLEDGMENTS

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