10

years of continuous service to Americans seeking access to quality healthcare

10

million contacts for information & assistance since 1996

10

donors in 1996 to 577 donors in FY2005/2006

10

Mission Statement



PATIENT ADVOCATE FOUNDATION

Patient Advocate Foundation is a national non-profit 501(c)3 organization that serves as an active liaison between the patient and their insurer, employer and/or creditors to resolve insurance, job retention, and/or debt crisis matters relative to their diagnosis through case managers, doctors and healthcare attorneys.

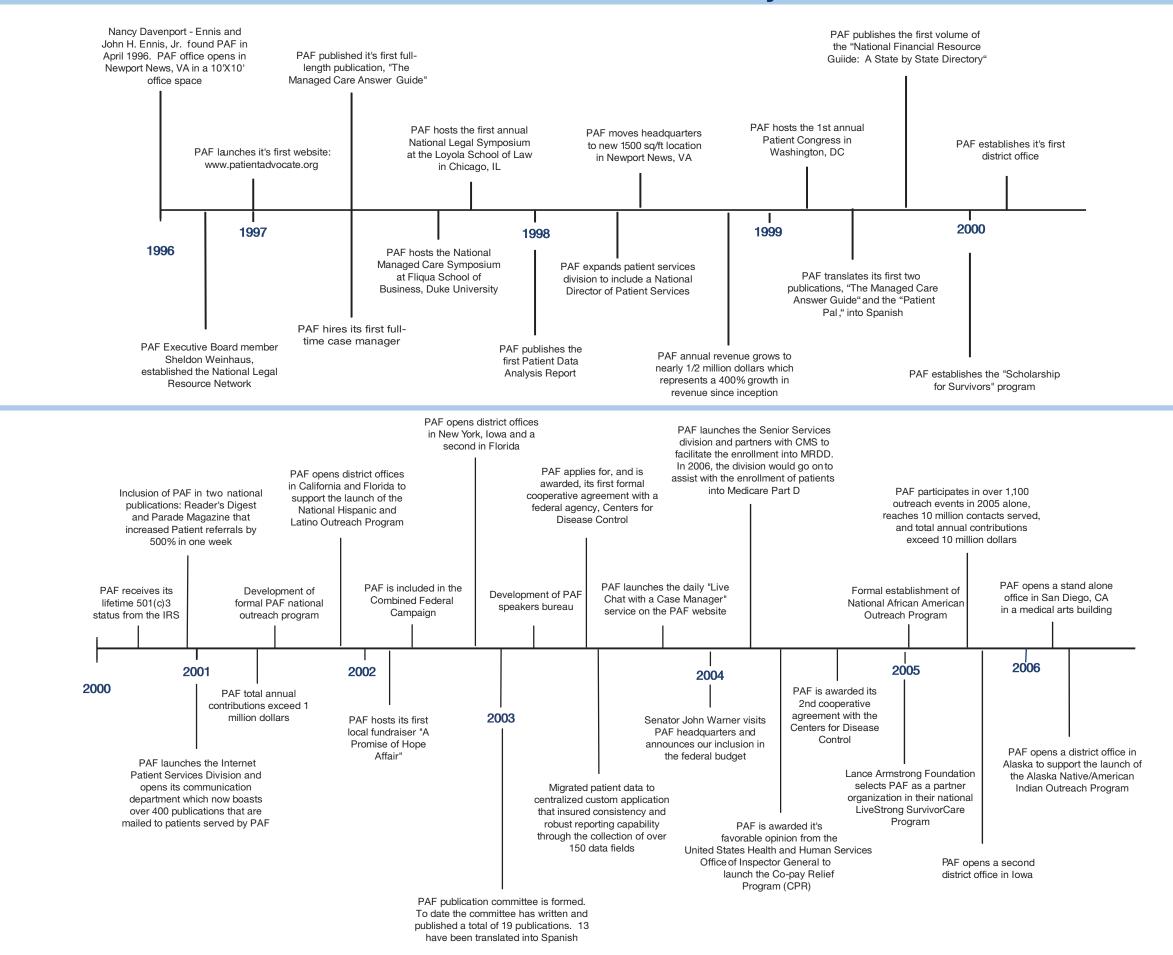
Patient Advocate Foundation seeks to safeguard patients through effective mediation assuring access to care, maintenance of employment and preservation of their financial stability.

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PAF is a tax exempt 501 (c) (3) non-profit organization Federal Tax ID No. 54-1806317

Patient Advocate Foundation...A 10 Year History



"I have had the opportunity in the past to visit Nancy Davenport-Ennis and the dedicated staff at PAF to learn first-hand about their work. Simply put, their efforts at helping people navigate through a complex healthcare system to get the good care they need is invaluable. The assistance that PAF has provided so many Americans in signing up for a Medicare Part D prescription plan is a great example of the work PAF does. That is why I have worked hard in the Senate to aid the PAF in its mission, and why I will continue to work with them in support of our mutually shared goals."

The Honorable John Warner (R-VA)

The Honorable John Warner (R-VA) United States Senate

"For the past ten years, PAF has brought hope to countless individuals in their quest for better access to healthcare. A range of issues can arise as people seek the healthcare they need, and PAF is always ready to lend a helping hand. Such work requires tireless dedication on the part of the employees of PAF, and I applaud each of them for their efforts. They represent the very best of our Commonwealth."

The Honorable George Allen (R-VA)
United States Senate

"I would like the thank the PAF for your steadfast service to our community and unyielding mission to help those in need. Your work and efforts have made a difference, and as a result, our Nation is fulfilling its mission of ensuring life, liberty, and the pursuit of happiness to all citizens."

The Honorable Jo Ann Davis (R-VA) House of Representatives

"The Patient Advocate Foundation has been a blessing to countless numbers of people with serious health issues that they don't have the ability to address on their own. Whether it's securing insurance coverage, medical treatments or financial assistance, the Foundation has reached out to countless thousands of people, and in many cases, saved lives. Their legislative efforts to solve meaningful structural problems in the healthcare industry have been successful and monumental. Every day they make a difference." Mayor Joe Frank
City of Newport News, VA

"It was bad enough failing my first Hepatitis C treatment. Then my insurance will not pay for my second, my case manager at PAF got my medicine approved in 4 or 5 hours. I was amazed. If that was not enough she even called back to make sure everything was okay, I never would have thought that an article in a medical magazine dated sometime in 2002 would end up helping me so much. I did not know that places like this even existed. Thank you PAF.

Newmarket. Tennessee

"There aren't enough words to say thank you for your hard work and dedication for all the help you gave me. I tell so many people about you and the foundation, that there are 'earth angels' out there to help."

New York

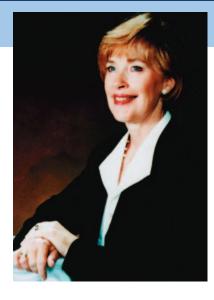
"Thank you so much for all your help. Last August when I first found out I had breast cancer, hurricane Katrina was heading for me, and my landlord wanted to evict me. And this was before the bills started rolling in! I had no idea I'd have so many to pay. It was such a relief to get your phone call. By then, I'd maxed out my prescription drug benefit and was having to pay full price for my meds. You were so prompt and efficient and caring. Not only did you take care of my co-pays, but with your help, I was able to get some assistance from the drug companies too."

Florida Breast Cancer Patient

"My husband and myself were very pleased with everyone we talked to through the process of our application. Friendly, helpful and caring people made us feel comfortable the whole time. This is a wonderful program and lightens the burden of our fight against my kidney cancer."

Wisconsin

Kidney Cancer Patient



A Decade of Service... Patient Advocate Foundation's Platform for the Future

As the fiscal year of Patient Advocate Foundation drew to a close June 30, 2006 with annual income exceeding eighteen million dollars and direct contributions in support of patients through our Co-Pay Relief Program exceeding thirteen million dollars, I was motivated to reflect on our first decade of service to America. With the Foundation's establishment April 4, 1996, in a very modest one room office with rented furniture,

no paid employees and the commitment of twelve members of our Executive Board of Directors, the vision I had on the day of Cheryl's funeral moved to implementation. Cheryl Grimmel, our friend who lost her life to breast cancer after a three and one half year battle at the age of 34 years leaving behind a fifteen year old son, inspired us for several years with her courage, optimism and undaunted search for the next therapy that would save or extend her life. She taught us many lessons that remain as foundational cornerstones today.

Every patient deserves the opportunity to fight for their life with dignity. The search for access to health care for patients with chronic, debilitating, and/or life-threatening issues is complex and requires an advocate that will not be daunted when barriers are identified in the pre-authorization, appeals and denial processes.

The advocate, to be effective, must have compassion for the patient and intolerance for the broken system of healthcare delivery as they search to negotiate access to health care, resolve medical debt crisis impeding continued access and sustain job retention. The national network of resources that PAF has developed through a decade of service to our nation has proven to be a formidable opponent and a successful mediator and arbitrator for millions of patients.

Courage is contagious. As Cheryl's courage inspired Jack and I to establish Patient Advocate Foundation to alleviate immediate danger and provide access to health care for many confronting the final barriers to accessing life-saving and/or life altering care, the courage of every PAF employee through this decade contributed to successful resolutions for more than 10 million persons who have contacted PAF for assistance since 1996 and for more than 155,000 cases that required assignment to a professional case manager for repeated service and intervention with an average of 5.8 contacts to achieve resolution per case. In 2004, we closed more than 15,000 cases with that number moving to more than 27,750 closed cases in 2005.

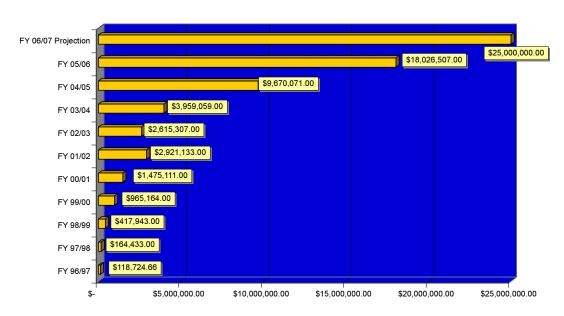
Hope springs eternal. The diagnosis of a life-threatening illness for most families fuels an immense battle to find solutions to save the life of their loved one. The professional case managers, resource center personnel, receptionists, information technology specialists, call counselors with Co-Pay Relief (CPR) and the entire administrative, executive and corporate development team members are committed to supporting that battle with professional intervention that provides favorable results.

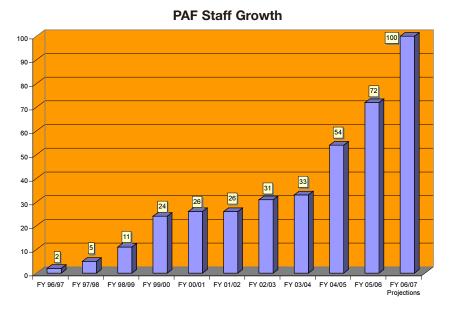
To date, the average annual percentage of successful case resolution is 98%. Social Security Disability contributes strongly to the 2% margin of failure as we reduce enrollment from almost two years to just months; however, for many of our patients, they often die before the approval is completed.

Disease waits for no one, no public program, state or federal legislative amendment, or practical regulatory modification. Life-threatening disease requires immediate positive action. That is Patient Advocate Foundation's daily commitment: to initiate intervention that results in very timely and positive results, as testified to in our Annual Patient Data Analysis Report, a compilation of our year's success in statistics documenting disease, issues, resolutions, geography, insurance status and demographics that contribute to the development of trends we see and can respond to. For example, the 2002 statistic that showed 5% of our callers needed co-payment assistance and in 2003 the statistic moved to 33%. This process documents objectively the work product of Patient Advocate Foundation and the outcomes for patients. It also provides a view to the world, including the legislative and policy arenas where health care decisions are being made. The voices of our patient's experiences become a sound of universal cacophony citing their universal issues that when compiled reflect the fractures in our nation's health care systems that are unresolved at both the state and federal level. Our uninsured crisis is reflected in our annual 21% percent uninsured caller number. It remains a constant challenge that 79% of all PAF callers are insured in Medicare, Medicaid, Veteran's Affairs and/or Department of Defense and commercial plans. When the patient calls PAF, the local, regional and state options have historically been exhausted with no resolution.

As you review this report, I would cite our sustained growth in staff which has moved from 57 last year to 72 this year: our growth in funding from \$9,670,071.00 to \$18,026,507.00: the addition of two new programs including the ABC Initiative serving both hospitals and clinics through formal contracting relationships while maintaining the additional 18 programs that started our year. In conclusion, I would also cite that our annual employee retention rate has averaged 89.9% to 98% annually for the past five years with the annual administrative support required of less than 15.5% inclusive.

PAF Annual Total Revenue





These foundational cornerstones reflect sustained outstanding leadership from the members of the Leadership Team of Patient Advocate Foundation and the insights and oversight of our Executive Board of Directors with the support also of our Scientific and Honorary Boards of Directors.

Indeed, the first decade of service PAF has provided to America has nurtured the development of a successfully diversified corporation of professional access specialists supported by data, information technology, seven web sites, a resource center with more than 400

publications and tapes and a national network of voluntary health care agencies, profit and non-profit, united with PAF to find solutions. This platform is the springboard for our future. We thank you for your contributions to our success and to the support of our direct patient services to our country.

We look forward to our journey through PAF's second decade of service with you as our partner.

In partnership and gratitude,

Nancy Davenport-Ennis, CEO

A Word from Our Board President

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It would be difficult to imagine where patients would turn for help if Patient Advocate Foundation were not there for them. From a seed of inspiration ten years ago to the mighty force that it has become, Patient Advocate Foundation has provided access to care services to more than ten million Americans over those ten years.

Nancy Davenport-Ennis and John Ennis could not have envisioned ten years ago when they founded PAF the impact it would have today, solving debt crisis, job retention and insurance issues for patients who have been diagnosed with a chronic, life threatening or debilitating disease. The diligence of the staff who work with these patients in mediating on their behalf is truly a testament to the vision that Nancy and Jack had in 1996. The staff is able to navigate the often difficult healthcare and societal system to help ease the burden of patients in need and to erase many of the obstacles they face.

It has been an honor to serve as President of the Board of Directors during this 10th year anniversary. On behalf of the Board of Directors of the Patient Advocate Foundation, we salute the leadership, staff, patients and supporters who make up the PAF family. Together, we all contribute greatly to improving the health care system for patients whom we serve.

Dr. William T. McGivney President, Board of Directors, 2004-2006

PATIENT ADVOCATE FOUNDATION

CO-PAY RELIEF

A Patient Assistance Program





















Patient Advocate Foundation (PAF) is pleased to report on the second annual year of the operation of its Co-Pay Relief (CPR) program. This program was introduced in April 2004 to provide financial assistance for insured patients who qualify medically and financially with the cash co-payments for their prescription drugs. This is a program approved by the Office of the Inspector General of the United States Department of Health and Human Services.

Highlights of the Co-Pay Relief Fiscal Year July 1, 2005 – June 30, 2006 include the following:

- Donations to the program increased five-fold as of June 30, 2006
- In FY 2005/2006, PAF opened seven new disease categories
- Disease categories with funding available to assist patients increased 110% to include the following:
 - Autoimmune Disorders
 - Breast Cancer
 - Colon Cancer
 - Diabetes
 - Kidney Cancer
 - Lung Cancer

- Lymphoma
- Macular Degeneration
- Pancreatic Cancer
- Prostate Cancer
- Sarcoma
- Secondary issues resulting from chemotherapy treatment
- Additional OIG approved disease categories are:
 - Brain Cancer
 - Cervical Cancer
 - Hepatitis A, B, C
 - HIV/AIDS
 - Kidney Disease (non cancer)
 - Leukemia

- Mental Health
- Multiple Sclerosis
- Myeloma
- Ovarian Cancer
- Testicular Cancer
- Uterine Cancer
- Length of time for patient approval has been reduced to 2-5 business days
- Office of the Inspector General (OIG) notified PAF that every dollar paid on behalf of a Medicare patient would count towards his/her True Out-Of-Pocket expense (TrOOP)
- PAF negotiated OIG approval to set individual yearly caps for each disease category
- PAF's monthly approvals result in equal dollars being distributed
- Total number of patients served by the program during FY 2005/2006 was 3,798. (Since inception of the CPR Program on April 1, 2004, co-payment assistance has been provided to 5,930 patients)

Co-Pay Relief is one of twenty programs offered by Patient Advocate Foundation to assist patients in accessing quality healthcare. The program operations were awarded a favorable ruling from the Department of Health and Human Services Office of the Inspector General on October 29, 2004. The OIG issued ruling #04-15 provides protection to those donors who participate in CPR. The ruling also approved 27 disease categories that could be serviced by the program.

National Endorsements:

Patient Advocate Foundation's Co-Pay Relief (CPR) program has received strong endorsement from both Centers for Medicare and Medicaid Services Administrator Dr. Mark McClellan and United States Department of Health and Human Services Secretary Michael Leavitt.

Media Summary:

Media outreach supporting the Co-Pay Relief program in FY 2005/2006 included placing recurring advertisements in the following publications:

- BLOOD
- Clinical Journal of Oncology Nursing
- Kidney Cancer Journal

- ASCO Daily News
- Hem/Onc Today

Additionally, the CPR program has been the focus of articles in tier one publications including:

- Wall Street Journal
- CURE Magazine
- New York Times
- Boston Globe
- U.S News & World Report

- Reader's Digest
- Family Circle Magazine
- USA Today

Operations:

Donations to the CPR program are allocated equally over a twelve month period to ensure that funds will be available throughout the year to award to patients. Each approved patient is allocated funds per twelve month period for reimbursement of approved co-pay assistance expenditures billed to CPR by treating physician offices or pharmaceutical agent suppliers. The amount allocated to patients varies by disease category. Reimbursement is made directly to the providers through debit card transfers or twice daily check runs.

The CPR program is functioning at maximum utilization every month. Due diligence is ensured through daily monitoring of individual patient accounts, disease silo accounts and daily expenditures. This monitoring is facilitated by a financial team, an accounting software program developed for PAF with oversight by the Chief Operating Officer and the Chief Executive Officer of Patient Advocate Foundation.

2005/2006 Donors:

Patient Advocate Foundation acknowledges with sincere gratitude the outstanding financial contributors to the Co-Pay Relief program. The vision and unselfish support provided by these donors brought financial, emotional, and psychological relief and, in many instances, extended and/or saved lives through the CPR program of PAF.

- Amaen
- AstraZeneca
- Bristol-Myers Squibb
- (osi) eyetech
- Genentech

- Pfizer
- Pfizer Oncology
- Purdue Pharma L.P.
- sanofi-aventis
- Susan G. Komen Breast Cancer Foundation

Entering our Second Decade of Resolving Access Issues

Since its inception 10 years ago in 1996, Patient Advocate Foundation's main service line has been the Direct Patient Services provided by its professional case management staff. From serving 157 patient contacts in 1996 to serving 33,319 patient contacts in FY2005/2006, Patient Advocate Foundation has remained true to its mission of safeguarding patients. The number of patient contacts requesting assistance from PAF rose 29.1% in FY2005/2006 over FY2004/2005. PAF's Direct Services provided to patients at no cost includes:

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

In FY2005/2006, PAF created the position of Quality Assurance Officer to oversee and audit the case work of the case managers to ensure that PAF is providing quality and complete service to those seeking our assistance. The Quality Assurance Officer is located in PAF's first stand-alone office in San Diego, California. This office is located in a medical office park and is also home to a bilingual case manager who is a member of the National Hispanic/Latino Outreach Program.

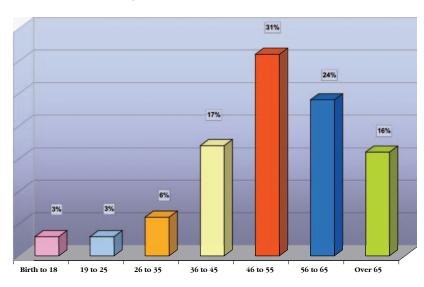
The PAF Resource and Communications Department, which supports the Direct Patient Services, creates customized Patient Paks containing information germane to each patient's issues and need for assistance. In FY2005/2006, the Resource Department mailed out 14,396 customized Patient Paks to patients being served by the Direct Patient Service Department.

Patient Advocate Foundation receives requests for services via email, telephone and its website, www.patientadvocate.org. There are more than 10,000 links from non-profit organizations, governmental agencies, educational facilities and corporations to the PAF website. In FY2005/2006, PAF received 51,291 requests for service via the Internet Patient Services division, increasing more than 15% over last year. Of those requests, 25.2% were from healthcare professionals, up from 20% in FY2004/2005, a clear indication that PAF is rapidly becoming a valuable tool for those working on behalf of patients and their access to care.

Total unique website visitors were 351,040 for the year, a 7.6% increase over the same period last year. The total number of web based views, hits and contacts for educational information totaled an additional 5,590,182, this is a 39% increase in web utilization over last year. In all, there were just over 6 million requests for direct patient services and educational information via phone, email or website visits during FY2005/2006.

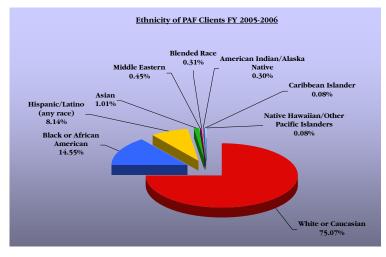
PAF Direct Patient Services: Who are our patients?

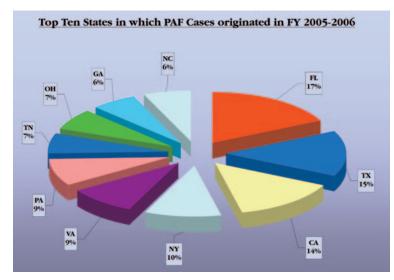
Ages of PAF Clients FY 2005-2006



As PAF works with patients requesting assistance, PAF case managers capture 294 fields of data from each patient. From this data PAF creates the Patient Data Analysis Report (PDAR) on an annual calendar year basis to determine what populations PAF is serving and what patient issues are becoming trends in various regions of the country. PAF has provided some of the data from the comprehensive Patient Data Analysis Report in the context of this annual report reflecting the patients served during FY2005/2006. In FY2005/2006, 65% of

the patients served were female while 35% were male, demonstrating a 1% increase in the male population over last fiscal year. PAF served patients of all ages with 12% being in the birth to 35 age range, 72% were aged 35-65 and 16% were over 65 years of age. Likewise, PAF assisted patients of many ethnicities with 75% of patients classifying themselves as White/Caucasian, 14.55% considered themselves Black or African American and 8.14% were Hispanic/Latino. We saw a .5% and .65% decrease in the

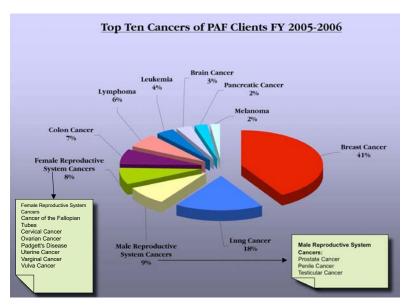




White/Caucasian and Black/African American populations respectively this year over last, while seeing an increase in the Hispanic/Latino population of 1.5%.

The top ten states that our patients came from in FY2005/2006 were Florida (17%), Texas (15%), California (14%), New York (10%), Virginia (9%), Pennsylvania (9%), Tennessee (7%), Ohio (7%), Georgia (6%) and North Carolina (6%). This data was relatively consistent from FY2004/2005 with one exception of Illinois

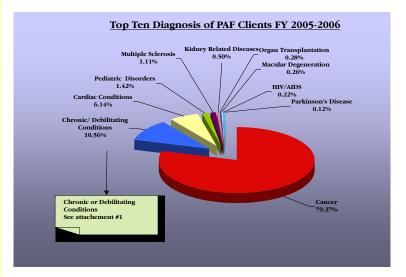
(6%) being replaced in the top ten by Tennessee (7%), largely due to significant changes in the Tennessee Medicaid Program that afforded PAF an opportunity to serve many patients from Tennessee who were seeking access to various treatments.

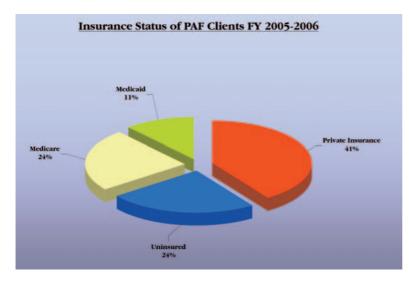


Cancer continues to be the primary diagnosis of PAF patients with 79.37% of all patients served reporting a diagnosis of cancer. Breast Cancer (41%) was the leading cancer diagnosis among our patients this year, up 1% from last year, with Lung Cancer quickly following at 17%, Male Reproductive System Cancers at 9%, Female Reproductive Cancers at 8%, Colon Cancer at 7%, representing a 6% increase over last year, Lymphoma at 6%, Leukemia at 4%, Brain Cancer at 3%, Pancreatic Cancer at 2% and Melanoma at 2%. This does, however, reflect an overall 5% decrease in the cancer population served

by PAF from FY2004/2005 when the rate was 84.3%. The remainder of the top ten diagnoses of PAF patients for FY2005/2006 includes Chronic/Debilitating Conditions (10.56%), of which there are over 100, Cardiac Conditions (6.14%), Pediatric Disorders (1.42%), Multiple Sclerosis (1.11%), Kidney Related Diseases (0.5%), Organ Transplantation (0.28%), Macular Degeneration (0.26%), HIV/AIDS (0.22%) and Parkinson's Disease (0.12%).







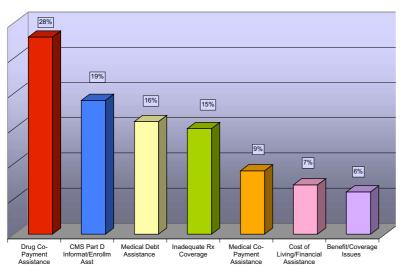
Primary Medicaid Issues of PAF Clients FY 2005-2006

Medical Debt Assistance
12%

Benefit/Coverage Issue
15%

Cost of Living/Financial Assistance
56%

Primary Medicare Issues of PAF Clients FY 2005-2006



Of the patients served in FY2005/2006, 76% had some form of insurance with 41% being privately insured, 11% receiving Medicaid and 24% covered under Medicare. This data represents a 4% increase in the privately insured patients and a 4% decrease in the Medicare patients served this year versus last. 24% of all PAF patients in FY2005/2006 were uninsured; this rate was unchanged from the previous year.

Direct Patient Services Forecast

In FY 2006/2007, Patient Advocate
Foundation will be implementing a national public service campaign to better inform
America about the services provided by
PAF on a day-to-day basis. PAF has hired a Vice President of Public Relations to begin working on behalf of PAF in the first quarter of FY2006/2007. The main focus of the public service campaign will be to identify and engage a national spokesperson for Patient Advocate
Foundation.

PAF is anticipating expansion of the office in San Diego, California during FY 2006/2007 to include additional case managers and Co-Pay Relief Call Counselors to better serve Americans in the western portion of the United States.

Direct Patient Services Partnerships

Hurricane Relief Program

In 2005, Hurricanes Katrina and Rita dealt devastating blows to the Gulf Coast, destroying parts of Louisiana and Mississippi. The Lance Armstrong Foundation and the Susan G. Komen Breast Cancer Foundation both offered grant funds to organizations to provide assistance to cancer patients who had been displaced as a result. Patient Advocate Foundation was awarded \$50,000.00 from the Lance Armstrong Foundation and \$100,000.00 from the Susan G. Komen Breast Cancer Foundation to provide financial assistance to these patients. These funds were used to help patients who evacuated from the devastation resume their cancer treatment by providing them with financial assistance to and from medical



LIVESTRONG

LANCE ARMSTRONG FOUNDATION



appointments/treatments, pharmaceutical therapies or treatments and any temporary or emergency housing costs. The funding would ultimately provide assistance to 125 cancer patients.

Lance Armstrong Foundation LiveStrong SurvivorCare Partnership

In FY 2004/2005, PAF entered into a partnership with the Lance Armstrong Foundation (LAF) to provide case management services to referrals from their SurvivorCare call center counselors. A cancer patient who calls into the LAF LiveStrong SurvivorCare program and is in need of the services provided by PAF, is directly referred to PAF to obtain those services. As well, patients are referred to CancerCare when appropriate as they are a partner in this program. This partnership entered into its second year in FY2005/2006 and PAF was able to assist 1,444 patients who had been referred from LAF.

Additionally, PAF has been retained by the Lance Armstrong Foundation to serve as expert reviewers of written materials they are developing for use by LAF patients through the LAF programs.



A-B-C Initiative: Access-Benefits-Claims

In 2003, PAF initiated a pilot program at the Cancer Center of the Carolinas to demonstrate PAF's effectiveness in pre-authorizations, coordination of benefits,

resolution of coding and billing issues and how these affected the patient and their loss of access to care. In July, 2005, PAF replicated this program, the Patient Access Partnership Program (PAPP) with six practice groups in Massachusetts, South Carolina, Florida, Colorado and Virginia. In May, 2006 an additional practice group in three cities in New Hampshire was signed into the program.

In March of 2006, the program was expanded into the hospital setting and renamed the A-B-C Initiative: Access-Benefits-Claims. Formal presentations have been made to eight major research hospitals throughout the United States thus far with anticipated contractual relationships occurring in the first quarter of FY 2006/2007.

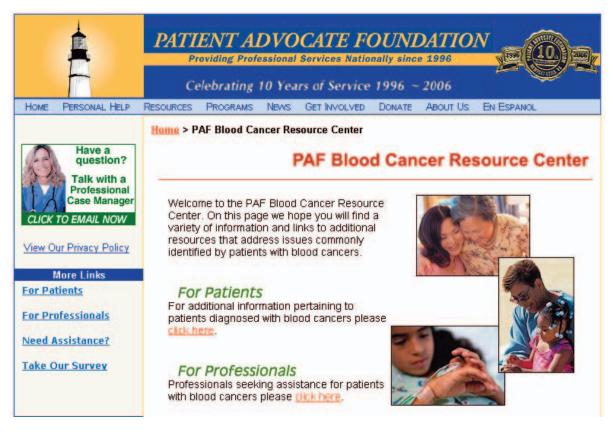
Centers for Disease Control and Prevention Grants Update

CDC/PAF Cancer Prevention and Survivorship Partnership

PAF is entering year four of this project which is an integral part of the CDC's Early Detection or Survivorship of Cancer in Underserved Populations initiative. PAF is providing case management services to an average of 373 patients per month versus the grant objective of providing services to 200 patients per month. In comments surrounding the Interim Report submitted in April, 2006, the CDC states that "PAF has consistently served more patients than planned for the program" and that "PAF is responding to the needs of the community it serves..."

CDC/PAF Hematologic Cancer Education and Outreach Partnership

FY2005/2006 marked year two of PAF's participation in the cooperative agreement "The National Organization Strategies to Provide Information and Education for Patients, Their Family Members, Friends and Care Givers with Respect to Hematologic Cancers." PAF continues to exceed the goals set forth in the agreement. The program has provided educational outreach to an additional nine states bringing the total to 18. More importantly, the goal of providing individualized educational patient counseling services to 125 hematological patients per quarter has been exceeded by 50%. Comments on the Interim Progress report submitted in April, 2006 include "PAF is demonstrating significant results..." and that "PAF is focusing efforts on the patients, the local, state and regional communities, in addition to, strengthening and expanding partnerships on the national level. PAF truly is striving to make an impact on the hematologic community from all levels and nationwide."



Screen shot of PAF's Hematologic Cancer Education web page created for the CDC Partnership

Patient Advocate Foundation

Outreach Programs

Patient Advocate Foundation has four distinct programs that provide targeted outreach to disparate populations: The Senior Services Division, The National Hispanic/Latino Outreach Program, The National African American Outreach Program, and The American Indian/Alaska Native Outreach Program.

Senior Services Division



The case managers assigned to the Senior Services Division provided extensive outreach during FY2005/2006, particularly between January 1 and May 15, 2006. Prescription drug coverage for Medicare Part D

enrollees began on January 1, 2006 with a deadline of May 15, 2006 for seniors to have enrolled into a prescription drug plan. The highlight of this outreach to seniors was the arrival of

the Medicare Rx Bus Tour to PAF headquarters on April 24, 2006. The Secretary of the U.S. Department of Health and



Human Services, The Honorable Michael Leavitt, joined PAF that day as did the Assistant Secretary Admiral John O. Agwunobi, M.D. They both

spent time talking with seniors who were at the event signing up for the Medicare Part D Prescription Drug Plan. The stop at PAF was one of two in the Hampton Roads area as the Medicare Rx Bus traveled the country enrolling eligible seniors.



In addition, PAF Senior Services staff, from July 1, 2005 to June 30, 2006,

participated in 60 events, providing

education and information to over 8,500 individuals. These events include the Lifesyles 50+ Expo, the Florida Conference on Aging Annual Meeting, Geriatric Oncology Consortium Annual Meeting, Invest in Aging

and Geriatrics 2005.



Left to right: The Honorable Michael Leavitt, Secretary, Department of Health & Human Services, talks with an enrollee.

Department of Health & Human Services Assistant Secretary Admiral John O. Agwunobi, M.D. and Mayor Joe Frank, City of Newport News, visit with seniors enrolling into Medicare Part D. PAF staff enrolling seniors.

Department of Health & Human Services Assistant Secretary Admiral John O. Agwunobi, M.D. and Nancy Davenport-Ennis, CEO, Patient Advocate Foundation.

The Honorable Michael Leavitt, Secretary, Department of Health & Human Services, chats with seniors.

PAF staff enrolling seniors.



Patient Advocate Foundation Outreach Programs



National Hispanic/Latino Outreach Program

PAF's National Hispanic/Latino Outreach Program (NHLOP) continued to grow in FY2005/2006. When initiated in 2001, 1.24% of the patients seeking assistance were Hispanic/Latino. For FY2005/2006, that number has increased to 8.14%. The three case managers assigned to NHLOP participated in 456 events providing education and outreach to over 13,000 individuals. National meetings attended included the National Association of Hispanic Nurses, the Latino Hispanic Cancer Disparities Workshop/Conference, the National Leadership Summit on Eliminating Racial and Ethnic Disparities and the National Hispanic Medical Conference.

National African American Outreach Program

Entering its second year of operation, the National African American Outreach Program (NAAOP) has grown as well. The number of staff assigned to the program grew from six to twenty under the leadership of Dr. Mary T. Christian, former member of the Virginia House of Delegates. In March of 2006, the NAAOP conducted a mailing to churches locally and in Alabama and Texas that included a hand-held fan that detailed the services provided by PAF. Alabama and Texas were selected to enable PAF's Hurricane Relief Funds program to be promoted within those areas where many from Louisiana and Mississippi had fled. In FY2005/2006, the NAAOP provided education and information to over 10,000 individuals through 165 events including Black Expo 2005, National Baptist Convention, Congressional Black Caucus, National Black Caucus of State Legislators, and the Sister's Network Annual Meeting.

American Indian/Alaska Native Outreach

Patient Advocate Foundation hired a part-time American Indian/Alaska Native Outreach Coordinator in May, 2006. This staff member is based in Anchorage, AK and is focusing on outreach to diabetic, cancer and macular degeneration patients. For the month of June, 2006, meetings were held with representatives from the Alaska Native Tribal Health Consortium of Diabetes Services, the Diabetes Wellness Gathering at South Central Foundation Primary Care Center, the Alaska Office of Public Health and the Eastern Aleutian Tribes.

In Summary

In addition to the above targeted outreach, PAF staff participated as either an exhibitor, attendee or presenter in 70 additional local, regional or national events, reaching over 53,000 individuals. Events included: PanCan Symposium, American Society of Clinical Oncology (ASCO), American Association of Diabetic Educators, Oncology Nursing Society, President's Cancer Panel Meeting, NCCN Annual Conference, National Colorectal Cancer Conference, National Baptist Convention, National Conference on Men's Health, American Academy of Ophthalmology Annual Meeting, ACCC Annual Conference and National Indian Health Board Annual Consumer Conference.

Forecast for PAF Outreach FY2006/2007

Patient Advocate Foundation is implementing a new exciting outreach initiative for FY2006/2007. The PAF Mobile Education Outreach Campaign will hit the road in November 2006. A PAF case manager will use a mobile home to travel to campgrounds throughout the southeastern states in the United States to provide outreach to individuals who are staying at the campgrounds. She will also visit clinics, health centers and shopping malls in the same area to provide educational information on the services provided by PAF. Patient Advocate Foundation is aggressively seeking foundation funding to add other regional swings that will make this program one that is national in scope.

Patient Advocate Foundation had the extreme pleasure of again hosting the Annual Patient Congress June 26-28, 2006 in Washington, DC. This year's Patient Congress was ushered in with a massive rainstorm in the Washington area that caused widespread flooding, but even the wet weather could not dampen the spirits and mission of the conference attendees!

This year's Patient Congress celebrated the 10th Anniversary of Patient Advocate Foundation along with 213 attendees representing 37 states and the District of Columbia, completed 166 visits to Capitol Hill offices; 61 of those meetings were with the House or Senate member. The three key points that attendees brought to Capitol Hill were providing assistance to the uninsured, implementing a patient navigator program, and passing appropriations for the Nurse Education Act programs. Attendees also participated in a private briefing at the original White House, the Eisenhower Building, offering education on the current Administration's health care priorities. The briefing was hosted by several White House personnel, including Julie Goon, Special Assistant to the President for Economic Policy. Additional keynote speakers were The Honorable Michael Leavitt, Secretary of the United States Department of Health and Human Services; Congresswoman Jo Ann Davis (R-VA), cancer survivor and member of the House Committee on Armed Services, International Relations and the Permanent Select Committee on Intelligence; Congresswoman Deborah Pryce (R-OH), currently serving as the Chairman of the House Republican Conference; Congresswoman Sue Myrick (R-NC), cancer survivor and member of the House Committee on Energy and Commerce; Congresswoman Lois Capps (D-CA), nurse and mother of child that lost a battle with cancer, and member of the House Committee on Energy and Commerce; and Mark McClellan, M.D., Ph.D., Administrator of Centers for Medicare & Medicaid Services (CMS).

Keynote scientific speakers included Anna Barker, Ph.D., Deputy Director, Advanced Technologies and Strategic Partnerships, National Cancer Institute speaking on "The Cancer Genome Atlas and the Future of Personalized Medicine"; Mary Lynne Hedley, Ph.D., Senior Vice President & Chief Scientific Officer, MGI Pharma speaking on a new therapeutic treatment for HPV called Amolimogene; Chris Willett, M.D., Chairman, Department of Radiation Oncology, Duke University Medical Hospital discussing "Novel Tx Approaches to Rectal Cancer"; and Regina Benjamin, M.D., our featured author of *How's Your Health?*, shared inspirational stories of her patients and examples of community involvement in her presentation entitled "Making a Difference: Everyone Can Be a Leader." We celebrated Patient Advocate Foundation's 10th Anniversary with a Parade of Heroes dinner at Union Station's East Hall to thank the individuals,

Top to Bottom:

Attendees making visits on Capitol Hill; The Honorable Mike Leavitt, Secretary, HHS, addresses the Patient Congress attendees at the "Parade of Heroes" dinner symposium; Senator John Warner (R-VA), is presented with the National Humanitarian Healthcare Award by Nancy Davenport-Ennis, CEO, PAF and other Virginia attendees; Dr. Mark McClellan, Administrator of CMS, addresses the Patient Congress attendees.



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organizations, and corporations nationally who have contributed to the sustained patient services provided by Patient Advocate Foundation. An inspirational concert by international recording artist Wintley Phipps was a centerpiece of the celebration.

Our attendee's voice in Washington did make an impact and for some, lasting friendships were born. The members of Congress with whom our attendees met were able to have a face to pair with the federal initiatives that are before them, elevating the importance of their work and emphasizing the gravity of the office they hold.

Each of the seven years that PAF has hosted the annual Patient Congress it has been our goal to offer a conference that is both inspiring and educational. We feel that we have again achieved our objectives based on the validation by our attendees, who, in their own words expressed:

"Patient Congress was an educational motivating and wonderful experience. I look forward to putting all I learned into action."

"The Patient Congress was a valuable experience with insight gained from the Hill Visits to the exchange of ideas with other participants."

"I want to go back home and work harder. I get so caught up on my day to day job. This was like a mountain top experience."

"I will always advocate on cancer issues. Your organization provides a valuable opportunity."

"It is an experience to express how we feel about our own experience and I think they (members of Congress) listen to what we have to say and it makes a difference. This is always well worth it and we come away feeling like we CAN make a difference. "

"(Patient Congress is) A wonderful event and organization that I am proud to support and be associated with. Doing the right thing provides a higher purpose in life and adds meaning, while giving life changing support to others."

Top to Bottom:

Representative Lois Capps (D-CA) addresses the Patient Congress attendees; Attendees participate in a meeting with their elected official on Capitol Hill; Representative JoAnn Davis (R-VA) addresses the Patient Congress attendees; Patient Congress attendees attendee a private briefing in the Eisenhower building hosted by members of the Bush Administration; Senator Mike Enzi (R-WY) is presented with the National Humanitarian Healthcare Award by Nancy Davenport-Ennis, CEO, PAF and other Wyoming attendees; Anna Barker, PhD, of the NCI, addresses the Patient Congress attendees during the Scientific Breakfast Symposium.

Patient Congress VII Exhibitors:

Abigail Alliance for Better Access to Developmental Drugs

Allergy and Asthma Network Mothers of Asthmatics

American Association for Cancer Research - Survivor and Patient Advocacy Program

American Institute for Cancer Research - Education Dept.

American Psychosocial Oncology Society

American Society for Therapeutic Radiology & Oncology

Association of Oncology Social Work

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Top to Bottom

Representative Deborah Pryce (R-OH) addresses the Patient Congress attendees; Lance Armstrong Foundation provides education to the Patient Congress attendees during the Educational Expo; Dr. Chris Willett, of Duke University Medical Center, educates the attendees during the Scientific Breakfast Symposium; Nancy Davenport-Ennis, CEO, PAF presents Sue Myrick (R-NC) with the National Humanitarian Healthcare Award following her address to the attendees; Regina Benjamin, MD, author of "How's Your Health" addresses the attendees; Attendees visit with a representative from CMS during the Educational Expo.













Scholarship for Survivors Presented at Patient Congress

Annually at Patient Congress, Patient Advocate Foundation, presents the *Scholarship for Survivors*.

The scholarships are funded by PAF but are named to honor Patient Advocate Foundation's Partners in Progress. PAF's Partners in Progress not only provide financial support to PAF and our mission, they also offer support to patients through their indigent drug programs and national care-giver programs.

The purpose of the *Scholarship for Survivors* program is to provide support to patients who are seeking to initiate or complete a course of study that has been interrupted or delayed by a diagnosis of cancer or other critical or life-threatening disease. The 2006 *Scholarship for Survivors* recipients are:

- The Cheryl Grimmel Award in Honor of Amgen:
 Eric Holland
 Oklahoma Christian University
- The Monica Bailes Award:
 Benton Brown
 UT Southwestern Medical School
- sanofi-aventis Scholarship: Drew Fisher University of New Mexico
- GlaxoSmithKline Scholarship: Kendra Smith Brockport University
- Novartis Oncology Scholarship:
 Monica Bowser
 University of North Carolina at Charlotte
- Pfizer, Inc. Scholarship: Suzanne Day Roberts Wesleyan College

Top to Bottom

Wintley Phipps, international entertainer, performs for the Patient Congress attendees at the "Parade of Heroes" dinner symposium; Patient Congress attendees participate in a meeting with their elected official, Senator Craig Thomas (R-WY) on Capitol Hill; Mary Lynne Hedley, PhD., with MGI Pharma educates the attendees during the Scientific Breakfast Symposium; Sheldon Weinhaus, Esq., PAF Founding Board Member presents Senator Blanche Lincoln (D-AR) with the National Humanitarian Healthcare Award along with an attendee from Arkansas; 2006-2007 Scholarships for Survivors Recipients



- Andrew Boggess
 Adrian College
- Rebecca Bungy
 Norfolk State University
- Emily Roberts
 Miami University
- Zazel-Chavah O'Garra Fordham University













On February 18, 2006, PAF held its fifth annual A Promise of Hope Affair at the Williamsburg Marriott in Williamsburg, VA which was kicked off by a performance by the Williamsburg Field Musick Fife and Drums. 381 attendees filled the ballroom and had the opportunity to bid on over 279 live and silent auction items in categories such as Art, Dining Around, Fashion & Jewelry, Home & Garden and Pampering Yourself. Entertainment was provided by the band All That. Our Mistress of Ceremonies and Honorary Chairperson for the evening was Barbara Ciara, anchorwoman for the local CBS affiliate. PAF was also joined by Congressman Robert Scott (D-VA), United States House of Representatives, Senator George Allen's (R-VA) regional staff representative, Patrice Harris, Mayor Joe Frank, City of Newport News and received letters from Senator John Warner (R-VA), Senator George Allen (R-VA) and Congresswoman Jo Ann Davis (R-VA). Through the support of local businesses, PAF's Board of Directors and PAF's Partners in Progress, A Promise of Hope Affair was able to raise over \$203,247.00 inclusive of sponsorships, donations, auction bids and in-kind donations. These funds enable PAF to continue the day-to-day work of helping patients nationwide resolve their insurance, job retention and/or debt crisis matters relative to their diagnosis of a chronic, life-threatening or debilitating disease.

Honorary Chairpersons

Barbara Ciara, Managing Editor and Evening News Anchor, WTKR-TV3, CBS

Dr. Mary T. Christian, former member, Virginia House of Delegates William Downey, Executive Vice President, Riverside Health System

The Honorable Joe Frank, Mayor, City of Newport News The Honorable Phil Hamilton, Virginia House of Delegates

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Gala Dinner: Amgen Oncology
VIP Reception: Eli Lilly and Company

Welcome Reception: AmerisourceBergen and The Lash Group

Entertainment: AstraZeneca

Silent Auction: Riverside Health System









Top to Bottom:

John Ennis, Jr., Chief Development Officer, Barbara Ciara, Anchor, News Channel 3, Mistress of Ceremonies and Nancy Davenport-Ennis, Chief Executive Officer.

Congressman Robert Scott (D-VA), U.S. House of Representatives.

PAF volunteer, greeting and handing out roses to the ladies. Mayor Joe Frank, City of Newport News, Virginia.

A PROMISE OF HOPE AFFAIR

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Top to bottom:

Musical Entertainment, All That; Williamsburg Field Musick Fife & Drums; Silent Auction; Dancing; VIP Reception











PAF in the News

In FY2005/2006, Patient Advocate Foundation was featured in many tier one media outlets. Those media included:

- The New York Times
- Ladies Home Journal
- Telemundo
- Business Week
- All You
- Real Simple
- Women & Cancer
- The Wall Street Journal
- Coping with Cancer
- CURE Magazine

In April, 2006, local Hampton Roads media provided coverage of U.S. Department of Health & Human Services Secretary Michael Leavitt's visit to PAF. Those media outlets included:

- The Daily Press
- The Virginian Pilot
- WAVY-TV 10, NBC
- WVEC-TV 13, ABC



The Honorable Michael Leavitt, Secretary, Department of Health & Human Services, addressed the crowd during his stop at the PAF Medicare Enrollment drive in April 2006.



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Michelle McMillian, Benefit Specialist
Beverly McNearly-DaRavalliere, Benefit Specialist
Avis Potter, Benefit Specialist
Rita Robinson, Receptionist
Karen Seitz, Application Specialist
Linda Shird, Application Specialist
Melissa Taylor, Benefit Specialist

Finance: __



Dynelle Lunsford, Vice President of Finance





Debbie Andrus, Senior Accountant

Alneda Clark, Junior Accountant Metise Council, Administrative Assistant

Information Technology:



Aaron Marshall, Executive Vice President of Information Technology



Greg Walkup, Executive Vice President of Informatics

Victoria Doheny, Web Development Manager Aaron Shivers, Helpdesk Operator Elena Ganeko, Database Administrator

Patient Advocate Foundation Staff

Communications:



Tracy Andrus, Manager, Communications Department

Rocquel Robinson, Administrative Assistant Dana Harper, Receptionist Lewis Shivers, Resource Room Assistant

Administrative Services: __



Ruth Anne Reed, Vice President of Human Resource Programs



Melynda Obergfell, Administrative Director, National Operations

Nancy Culbertson, Travel & Outreach Coordinator

Corporate Consultants

Hugh Barlow, CPA, Senior Partner, Goodman & Co. Mary T. Christian, Ph.D., PAF National African American Outreach Program Consultant James C. Smith, Esquire, Corporate Attorney

Medical Case Review

Dr. Bruce Avery, Clinical Case Consultant, Practicing Community Oncologist & Hematologist, Hematology-Oncology Knoxville, TN

Mary Fujii, Clinical Case Consultant Preauthorization Specialist Hematology-Oncology Knoxville, TN

Combined Federal Campaign and Combined Virginia



PAF continues to participate in the Combined Federal Campaign (CFC) which was established by the United States government as a way for Federal employees to support their charities of choice. PAF's CFC number is 1240.

PAF also participates in the Combined Virginia Campaign (CVC), giving Commonwealth of Virginia employees the opportunity to support charities. PAF's CVC number is 1540.

Patient Advocate Foundation

Financial Statements

Patient Advocate Foundation

Statements of Activities

Revenues, pains and other support			1000			ñ	2007	
Revenues, gains and other support	Unrestricted	Temporarily Restricted	Permanently Restricted	Total	Unrestricted	Temporarily	Permanently	E
TOOLS TO THE PARTY OF THE PARTY				Tana	Omeanica	TYCON I CICCO	INCS. I TOTO	1 Otal
Contributions								
Grants	\$ 4,307,317	\$12,866,667		\$ 17,173,984	\$ 3.329.967	\$ 5,711,250	€	\$ 9 041 217
Private and public donations	31,556		•	31,556	23.741		·	73,741
Donated services and materials	126,395	ı	,	126.395	129 563	4		170,62
Patient Congress	199,390	1	•	199,390	192,255	,	1	102,203
Promise of Hope	146,388	·	1	146,388	145,735			145 735
Special events	59,011	•		59,011	134,471	ı	ı	134 471
Investment income (loss)	416,178	1	(39,642)	376,536	101,346	1	43 836	145 182
Net assets released from restrictions	5,827,598	(5,827,598)		1	1,738,270	(1,738,270)		707,0
Total revenues, gains								
and other support	11,113,833	7,039,069	(39,642)	18,113,260	5,795,348	3,972,980	43,836	9,812,164
Expenses								
Program services								
Patient services	2,523,380	•	•	2,523,380	1,968,656	1	1	1.968 656
Co-Pay relief	7,461,400	1	1	7,461,400	2,551,960	ı		2 551 960
Patient Congress	338,037		•	338,037	206,269		1	206.269
Scholarships	75,248	1	1	75,248	68,514	,	,	68 514
Supporting services:								7,00
Management and general	576,354	•	1	576,354	636,389	1	1	636.389
Fundraising	149,902	-	ı	149,902	84,731	4	-	84,731
Total expenses	11,124,320	-		11,124,320	5,516,519	. t	đ	5,516,519
Change in net assets	(10,487)	7,039,069	(39,642)	6,988,940	278,829	3,972,980	43,836	4,295,645
Net assets - beginning of year	723,400	4,957,855	1,859,671	7,540,926	444,571	984,875	1,815,835	3,245,281
Net assets - end of year	\$ 712,913	\$11,996,924	\$ 1,820,029	\$ 14,529,866	\$ 723,400	\$ 4,957,855	\$ 1.859.671	\$ 7.540.926

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

Patient Advocate Foundation Statements of Financial Position

Statements of Financial Position

June 30,	 2006	 2005
Assets		
Current assets		
General operating cash and cash equivalents	\$ 2,062,002	\$ 1,197,904
Restricted CPR cash and cash equivalents	11,996,924	4,957,855
Unconditional promises to give	13,000	37,574
Interest receivable	38,553	43,913
Employee receivable	498	954
Due from NPAF	110	74
Inventory	42,235	51,539
Prepaid expenses	39,841	17,694
Investments	 1,729,082	 1,750,680
Total current assets	15,922,245	8,058,187
Property and equipment - net	267,313	217,071
Other assets		
Refundable deposits	 11,402	 10,254
	\$ 16,200,960	\$ 8,285,512
Liabilities and Net Assets		
Current liabilities		
Accounts payable and accrued expenses	\$ 232,997	\$ 148,513
Deferred revenue	1,349,167	511,875
Accrued vacation leave	 88,930	84,198
Total liabilities	 1,671,094	744,586
Net assets Unrestricted	712,913	723,400
Temporarily restricted	11,996,924	4,957,855
Permanently restricted	1,820,029	1,859,671
	 14,529,866	7,540,926
Total net assets	14,329.000	1,540,340

Patient Advocate Board of Directors



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& Chief Development Officer
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Newport News, Virginia



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Essex Richards, PA
Charlotte,
North Carolina
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Chief Executive Officer
National Comprehensive Cancer
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Jenkintown, Pennsylvania
Board President



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Inova Fairfax Hospital
Fairfax, Virginia
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Wimberly, TX
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Hematology-Oncology
Knoxville, Tennessee
Board Advisor



Don Conway, M.D.
Director,
The Healthcare Initiative
Tuck School of Business at
Dartmouth
Hanover, New Hampshire



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The Honorable Patrick Dougherty Missouri State Senate St. Louis, Missouri



Rene Cabral-Daniels
Director
Office of Health Policy and
Planning
Virginia Department of Health
Richmond, Virginia



Sheldon Weinhaus, Esq. Weinhaus & Potashnick St. Louis, Missouri



The Honorable Phil Hamilton Virginia House of Delegates Newport News, Virginia



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Partner
enQ Strategies
Des Moines, Iowa



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