## Thyroid Eye Disease Financial Aid Fund Program Disclaimer

Patient Advocate Foundation's ("PAF's") Thyroid Eye Disease Financial Aid Fund provides financial assistance to patients who have been diagnosed with Thyroid Eye Disease and who are in active treatment or maintenance therapy. In order to qualify for financial assistance from the Thyroid Eye Disease Financial Aid Fund, the patient must (1) have been diagnosed with a qualifying Thyroid Eye Disease condition (2) be in active treatment or maintenance therapy for Thyroid Eye Disease and (3) meet the financial eligibility requirements. The Thyroid Eye Disease Financial Aid Fund provides a grant award to assist patients with expenses related to transportation, lodging, and utilities.

Qualifying patients are provided a one-time grant at the time they are approved for assistance from the program. Financial assistance through the Thyroid Eye Disease Financial Aid Fund is provided on a first come, first serve basis to the extent the program has capacity to provide assistance. Enrollment in the program, and receipt of the one-time grant, is a gift to the enrollee based on the availability of funding and conditioned on use of the financial assistance for eligible expenses. Patient Advocate Foundation has no contractual obligation to provide such assistance to qualified enrollees.

Eligibility for assistance from the Thyroid Eye Disease Financial Aid Fund is not dependent on the use of a particular drug, particular supplies, or particular provider or suppliers and patients are free to switch drug therapies, treating physicians, pharmacies, and suppliers at any time without affecting their continued eligibility for assistance.

The Thyroid Eye Disease Financial Aid Fund reserves the right to request additional information to verify compliance with program eligibility guidelines. Failure to provide the requested information may result in the closure of the application for assistance. Additionally, if at any time it becomes evident that information has been provided under false pretense, the eligibility process for assistance will be terminated.

The Thyroid Eye Disease Financial Aid Fund patients' contact information may be used in the future to share printed and/or electronic communications from The Patient Advocate Foundation. If the patient does not wish to receive print and/or electronic communications from the Patient Advocate Foundation, he/she may contact the program at 1-855-824-7941 and request to have his/her contact information removed from the mailing list.

Patient data collected through the application process may also be used in de-identified aggregated reports. This means that information and data patients provided to the Thyroid Eye Disease Financial Aid Fund during the enrollment process may be combined with other patients' data to prepare reports analyzing patient needs. The Thyroid Eye Disease Financial Aid Fund will only use de- identified patient data externally, i.e., patient data where all identifying data terms like the patient's name, identifying numbers, etc. have been removed. The Thyroid Eye Disease Financial Aid Fund will always protect all patient information and adhere to the Patient Privacy Policy. A copy of the Patient Privacy Policy can be accessed on the Patient Advocate Foundation website: <a href="https://www.patientadvocate.org/privacy-policy/">https://www.patientadvocate.org/privacy-policy/</a>

By accepting a grant from the Thyroid Eye Disease Financial Aid Fund patients are attesting that they agree to use the grant funds only for eligible expenses. The Thyroid Eye Disease Financial Aid Fund reserves the right to request documentation from patients demonstrating that the grant funds have been used appropriately.