There’s an old saying, “If you want to walk fast, walk alone; if you want to walk far, walk together!” While I’ve often heard reference to this saying, last year demonstrated the extent of its truth and wisdom. For the PAN Foundation, 2013 was the year of expanding our reach through partnerships, and together we have indeed come very far in ensuring patients can access needed medical care.

Many individuals and families are facing numerous changes in their health insurance coverage. Research shows that the evolution of benefit design is shifting a higher percentage of healthcare costs to patients, while the implantation of the Affordable Care Act is resulting in a high number of newly underinsured patients as consumers opt for low-premium insurance plans. These marketplace dynamics can make breakthrough therapies essentially unattainable for many patients without the help of financial assistance programs. As a result, more and more individuals are seeking assistance from PAN, and I am proud that the PAN Foundation was able to impact the lives of nearly 90,000 patients in 2013 by providing access to often life-saving medications—a feat we have only been able to accomplish with the help of our dedicated partners.

As you read through our Annual Report you will notice partnerships come in many shapes and sizes. They may take the form of life partners or spouses. PAN Foundation patient Al and his wife, Jennie, have leaned on each other in sickness and in health in order to conquer 50 years worth of life challenges (read more about their touching journey on page 8). Or they may be about people you work with, like Ashley and her colleagues at Tennessee Retina, who work hard to anticipate their patients’ need for co-pay assistance so they can begin receiving treatment as quickly as possible (read more about Tennessee Retina on page 12).

In 2013, the PAN Foundation entered into a partnership with ZERO - The End of Prostate Cancer, a nonprofit organization dedicated to providing support to prostate cancer patients and their families. By working together, we have not only expanded our ability to provide financial assistance to these patients, but have also provided them the educational and community resources they need to battle this devastating disease (learn more about ZERO and our innovative partnership on page 13).

The PAN Foundation has had a phenomenal year, and we are proud of every patient’s success story. Of course, none of this could have been achieved without our donors. Your continued support has made it possible for us to reach more patients in need, many of whom would otherwise be unable to access the treatment they need to maintain or regain their quality of life. And for that, we simply can’t thank you enough.

As we celebrate our 10th anniversary this year, we look back on a decade of providing help and hope to patients and families who need it most, a decade of being a beacon of light during many people’s darkest hours. While we are exceedingly proud of how far we’ve come and how much we’ve accomplished in our first decade, there is too much that still remains to be done to simply revel in our progress.

Thank you for being with us for 10 years, trusting us and sharing with us in the personal victories of our patients. We count on you and hope you will join us for many more years to come so that, together, we can leave a larger, more meaningful footprint in the lives of patients across the country.

With deep gratitude,

Kim Schwartz
Chairwoman, PAN Foundation Board of Directors
The Patient Access Network (PAN) Foundation offers help and hope to people with chronic or life-threatening illnesses for whom cost limits access to breakthrough medical treatments. Founded in 2004 as a national 501(c)(3) organization, the PAN Foundation has contributed nearly $400 million in assistance to more than 280,000 underinsured patients, providing much needed financial assistance through nearly 60 disease-specific assistance programs.

Through partnerships with generous donors, healthcare providers, specialty pharmacies and nonprofit organizations, the PAN Foundation continues to help thousands of underinsured patients and their families by lessening the burden created by the out-of-pocket costs associated with their life-saving medications.

The PAN Foundation helps patients suffering from certain cancers, chronic illnesses and rare diseases access the medications they need to get well through nearly 60 disease-specific financial assistance programs. By helping them afford their oftentimes life-saving medications today, the PAN Foundation gives patients and their families hope for a healthier tomorrow.

The PAN Foundation’s Disease-Specific Assistance Programs

### Chronic Illness Programs

- Age-Related Macular Degeneration
- Ankylosing Spondylitis
- Asthma
- Chronic Iron Overload
- Crohn’s Disease
- Cytomegalovirus
- Diabetic Foot Ulcers
- Diabetic Macular Edema
- Growth Hormone Deficiency
- Hepatitis B
- Hepatitis C
- HIV/AIDS
- Idiopathic Thrombocytopenic Purpura
- Kidney Transplant
- Immunosuppressant
- Multiple Sclerosis
- Plaque Psoriasis
- Post-Menopausal Osteoporosis
- Psoriatic Arthritis
- Respiratory Syncytial Virus
- Retinal Vein Occlusion
- Rheumatoid Arthritis
- Secondary Hyperparathyroidism
- Solid Organ Transplant
- Immunosuppressant
- Ulcerative Colitis
- Venous Leg Ulcers

### Oncology Programs

- Anaplastic Large Cell Lymphoma
- Basal Cell Carcinoma
- Bone Metastases
- Chemotherapy-Induced Neutropenia
- Chronic Lymphocytic Leukemia
- Colon Cancer
- Cutaneous T-Cell Lymphoma
- Gastrointestinal Stromal Tumors
- Hodgkin’s Lymphoma
- Mantle Cell Lymphoma
- Metastatic Breast Cancer
- Melanoma
- Metastatic Castrate Resistant Prostate Cancer (co-pay/travel)
- Multiple Myeloma
- Myelodysplastic Syndrome
- Myeloproliferative Neoplasms
- Neuroendocrine Tumors of Pancreatic Origin
- Non-Hodgkin’s Lymphoma
- Non-Small Cell Lung Cancer
- Philadelphia Chromosome Positive Acute Lymphoblastic Leukemia
- Renal Cell Carcinoma
- Thyroid Cancer

### Rare Disease and Other Programs

- Acronegaly
- Cushing’s Disease, Cushing’s Syndrome and Related Comorbidities
- Gaucher Disease
- Homozygous Familial Hypercholesterolemia (co-pay/premium)
- Methicillin-Resistant Staphylococcus Aureus (MRSA)
- Short Bowel Syndrome (co-pay/premium)
- Tuberculous Sclerosis Complex
- Uveitis
- Wilson Disease

- Initiated in 2013
- Initiated in 2014

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**Providing Help and Hope to Underinsured Patients and Families Since 2004**

- The PAN Foundation makes it simple and convenient for patients to access the financial assistance they need. PAN has a quick, streamlined application process for patients and easy-to-navigate online portals for specialty pharmacies and providers.
- The PAN Foundation processes applications for co-pay assistance instantly, with eligibility outcomes and billing information provided to patients and providers in less than one minute. The introduction of this unparalleled processing efficiency gives patients instant access to prescribed medical regimens — providing help and hope for a healthier tomorrow.

- The PAN Foundation provides financial assistance ranging from $500 to $15,000 per year to qualified patients to help cover their co-payments; deductibles; co-insurance; and, for certain disease states, insurance premiums and travel assistance.
- The PAN Foundation uses a state-of-the-art actuary reserve model; maximizing the distribution of donated dollars, and helping more patients access the medication they need.

**The PAN Foundation’s Mission**

The PAN Foundation offers help and hope to people with chronic or life-threatening illnesses for whom cost limits access to breakthrough medical treatments.

**About the PAN Foundation**

The PAN Foundation’s Vision

The PAN Foundation envisions a society in which every individual can access needed medical care, offering hope for a healthy tomorrow.

**The PAN Foundation’s Instant Approvals!**

Patient Approvals in Under 1 Minute!

Hear firsthand about the PAN Foundation and the vital role it plays in the lives of hundreds of thousands of patients. Watch “Offering Co-Pay Assistance to Underinsured Patients: Understanding the Need for Help and Hope” now by scanning this quick response (QR) code.
How PAN Delivers Help and Hope

The PAN Foundation helps alleviate the financial burden on underinsured patients with certain cancers, chronic illnesses and rare diseases (for a full list of disease programs, see page 5) by providing them with assistance affording the medications they need to get better and regain their quality of life.

But how does a patient with health insurance coverage find him- or herself in need of financial assistance? And how does he or she go about applying for and receiving this assistance? Here is a step-by-step breakdown of the PAN Foundation Process.

**DIAGNOSIS**

An underinsured patient, or a patient whose health insurance does not adequately meet their healthcare needs, leaving unmanageable out of pocket costs, is diagnosed with a critical or chronic illness.

**INITIATING OR CONTINUING TREATMENT**

Upon initiating or continuing treatment, an underinsured patient being treated for a critical or chronic illness becomes overwhelmed by the financial burden the medication places on him or her (and his or her family).

**APPLICATION REVIEW**

A member of patient's care team identifies the potential financial burden the out-of-pocket costs of the medication the patient needs to get well may pose for the patient and his or her family and provides the patient with information about the availability of copay assistance through the PAN Foundation.

**RECEIVING ASSISTANCE**

The patient's provider or specialty pharmacy on their behalf can apply for additional financial assistance, as long as funds are available.

**FINANCIAL BURDEN**

The patient may even begin weighing whether to pursue/continue treatment, or abandon treatment to ease the burden on him- or herself and his or her family.

**UNDERGOING TREATMENT**

The PAN Foundation provides assistance for the duration of treatment, or a rolling 12-month period. At the end of the award period, patients are sent a prefilled application for renewal, if continued assistance is needed and made available.

**APPLICATION FOR ASSISTANCE**

The PAN Foundation helps alleviate the financial burden on underinsured patients by providing them with assistance and ultimately helping them regain their quality of life.
When Al and his wife, Jennie, exchanged marriage vows a half-century ago, they pledged to love and honor each other and to be each other’s partner and friend through good times and bad. They promised to weather both life’s sunshine and its storms together. All they knew on that summer day in 1964 was that they loved each other and that it would be enough to see them through. Jennie, a brittle Type I diabetic since childhood, faced many struggles from her frail health. Al took on the role of her caregiver without a second thought. For him, there was no question — being her caregiver was just part of his sacred vow.

Al and Jennie’s partnership blossomed, as did their life together. As with many young families, their union often required them to “divide and conquer,” with Al finishing college and beginning a career as an IT developer for financial institutions and Jennie staying home to care for their two children. Al and Jennie worked hard and put love and care in everything they did. With such a frenzied day-to-day life, the couple dreamed of the freedom of the open road and the tranquility of being out in nature. When Al retired, they planned to buy an RV and travel the country, visiting the nation’s many national parks, developing their burgeoning interests in photography, kayaking and relaxing.

With Al’s retirement fast approaching and their dreams just out of reach, the family found another dark cloud overhead. Their son, who at age 29 was recently married and expecting his first child, was diagnosed with acute lymphoblastic leukemia, a cancer of the blood that is normally only seen in young children. With such a rare diagnosis for an adult, treatment options were scarce, and those that did exist were costly. Their son required nearly a year of treatment at a leading cancer center to get his cancer into remission. Without a second thought, Al and Jennie stepped in to help financially and otherwise. Despite everything, shortly after returning home from treatment, he relapsed, and eventually lost his battle, leaving his grief-stricken family behind. Together, Al and Jennie persevered through those dark days. Although their savings had taken a huge hit, after Al retired a few years later, he and Jennie were able to purchase an RV. They sold their house and moved into a condo very close to where their daughter now lives. After weathering so many personal storms, the couple set off in search of sunshine and peace, taking an inaugural trip to Yellowstone National Park and visiting their extended family.

It was just after their return home that the skies darkened once again. Noticing some breathing issues, Al went to see his doctor. He just wanted to make sure everything was fine before he and Jennie set off on their next adventure. Unfortunately, everything was not fine. Al was diagnosed with advanced-stage non-small cell lung cancer.

Never one to think of himself, Al’s greatest fear was for his wife. Who would take care of her if he became unable to do so? The thought terrified him, and he vowed to do whatever it would take to make sure they never had to find an answer to that question.

Luckily, a relatively new treatment protocol was showing great results with Al’s particular type of cancer. However, the co-pay for this treatment was significant — much more than Al and Jennie could manage on their fixed retirement income. Jennie, always the “worryer” of the pair, was overcome with anxiety. After spending so many years stretching their means and carefully saving, the reality was they couldn’t figure out how to afford Al’s medication.

Then one day, Al and Jennie learned about the PAN Foundation from a staff member at his treatment center, who helped Al apply for assistance. In no time at all, they learned that the PAN Foundation had awarded Al sufficient co-payment assistance to cover the out-of-pocket cost of his treatment, lifting a huge burden they couldn’t otherwise bear.

Thanks to the help Al received from the PAN Foundation, he is feeling better and is able to resume much of his active lifestyle. More importantly, he is able to continue caring for Jennie. Now, they say they work together to care for each other. While Al’s cancer is not curable, it is very much under control, and thanks to the treatment available, Al’s doctor predicts it will continue to be under control for the foreseeable future, which Al credits to the assistance from the PAN Foundation.

Al’s gratitude for the PAN Foundation is “beyond what he is able to communicate.”
In 2013, the PAN Foundation reported contributions of $313.39 million, an increase of 75 percent over its 2012 total. Since PAN was established in 2004, contributions have consistently represented more than 90 percent of the Foundation’s total support and revenue. Continuing this trend, in 2013, contributions represented 97.6 percent of this total. These contributions enabled the PAN Foundation to provide assistance to nearly 90,000 patients through nearly 60 disease-specific assistance programs during the course of the past year. For more detailed information and to view the Foundation’s 990 tax return in its entirety, please visit www.PANFoundation.org.

In 2013, the PAN Foundation recorded total expenses of $188,379,924, a 63.7 percent increase over the previous year. Looking closer at the Foundation’s 2013 expenses:

- 92.5 percent, or $174 million, of these expenses is associated with co-pay assistance;
- 5.7 percent is associated with other program expenses, including fees for program operations, patient determinations and related services;
- Administrative and fundraising expenses accounted for 1.8 percent and 0.2 percent of total expenses, respectively; and
- For the last six years, less than one penny of each dollar contributed to the Foundation has been spent on fundraising, an extraordinary level of “fundraising efficiency”. Thanks to the generous support of the PAN Foundation’s donors, PAN continues to forecast growth. In 2014, the Foundation expects to touch the lives of more than 175,000 patients.

In many instances PAN provided advice and guidance when the patient did not qualify for PAN assistance.

For every dollar donated to PAN, 94 cents is used directly in the treatment and medical care of patients.

Patients can be enrolled any time of day or night via our state-of-the-art specialty pharmacy and provider portals.

For the third year in a row, the PAN Foundation achieved significant growth. This growth and increased support has enabled the PAN Foundation to steadily increase the number of patients it is able to help each year, as well as expand the number of assistance programs it operates.
Last year, the PAN Foundation partnered with more than 25,000 healthcare provider practices across the country to help patients with critical and chronic illnesses access the medication they needed. From allergy/immunology to urology and many more, practices both large and small team up with the PAN Foundation to ensure patients aren’t deterred from seeking or continuing their treatments because of financial concerns.

Tennessee Retina, based in Nashville, is one such provider practice. Established in 1978, it is one of the premier retina practices in the nation and is currently serving patients at nine locations in middle Tennessee and southern Kentucky.

According to Ashley Arnett, the practice’s patient assistance coordinator, the PAN Foundation is a very large part of what Tennessee Retina does, with numerous patients currently receiving assistance, and more applying every day. As the person charged with ensuring patients can obtain assistance to afford their treatments, Ashley works closely with both the PAN Foundation and the clinic’s patients who receive assistance.

“Especially in the past year, we have really grown to rely on PAN for our patients, and the PAN Foundation has always come through for our patients,” Ashley said.

With such an “easy and quick” application process, Ashley says that the PAN Foundation enables their patients to access the help they need when they need it, which is often vital in preserving their vision.

“I hear so often from patients that they would have to miss or delay treatments were it not for the help they’ve received from PAN. They wouldn’t be able to get the care they need to see and experience life without this assistance.”

Enabling patients to receive and stay on their treatments in a timely manner and stay on their prescribed treatment schedules ultimately helps patients keep their vision stable while also alleviating some of the emotional stress and anxiety of being diagnosed with a critical or chronic illness.

“The PAN Foundation also helps our clinic to run more smoothly because we have a resource we can direct patients to when they first start treatment. Patients go into their very first treatment with a plan, so we don’t have to scramble or delay midway through.”

Having noticed that deductibles and out-of-pocket costs are once again on the rise for many of Tennessee Retina’s patients, Ashley predicts the PAN Foundation’s role will continue to grow. “Without the PAN Foundation, a lot of our patients would have to purposely delay their treatment to save up enough money to be able to afford it, which would lead to serious medical issues in most cases—primarily, a decrease or loss of vision.”

“The way that Ashley sees things, it’s a sort of snowball effect. “If patients who are otherwise unable to afford the out-of-pocket costs of their treatment receive assistance from the PAN Foundation, they will stay on schedule and receive their prescribed treatment for the full course of the regimen. This will keep their vision stable, leading to a vastly improved quality of life. The PAN Foundation is an integral part of making this all possible for a lot of patients, and that’s huge.”

The PAN Foundation is always looking for opportunities to further its reach and expand its ability to assist patients and their families. In 2013, the PAN Foundation was able to seize one such opportunity, embarking upon an entirely new initiative aimed at furthering the Foundation’s ability to assist patients, specifically those with prostate cancer.

It is estimated that a quarter-million men in the United States will be diagnosed with prostate cancer in 2014 and that nearly 30,000 lives will be lost to this terrible disease, making it the second-leading cause of cancer deaths for men. Even recently, the prognosis for patients with an advanced-stage prostate cancer diagnosis was grim at best. However, recent advancements in science and biotechnology have given way to the development of new and exciting therapeutics, creating hope where there was none just a few years ago.

The PAN Foundation saw the excitement surrounding the development of these new treatment options as well as the financial challenges facing advanced prostate cancer patients and their families and knew that there was a need for assistance. In response to these challenges, PAN launched its metastatic castrate-resistant prostate cancer assistance program in the fall of 2012. In doing so, it became increasingly apparent that these patients and families needed some additional help understanding their disease and how to fight it.

“There are more than two million prostate cancer patients in the United States today, and too many of them are cut off from affording treatments they desperately need to fight the disease,” said Jamie Bearse, president and chief executive officer of ZERO — The End of Prostate Cancer.

“We are honored to partner with the PAN Foundation to stop the pain and suffering due to prostate cancer by providing education and support to patients with advanced disease.”

Through this collaboration, ZERO — The End of Prostate Cancer, a national nonprofit organization with the mission to end prostate cancer, and the PAN Foundation were able to bring together their respective expertise to help individuals living with prostate cancer, providing not only financial assistance but also education and emotional support to patients and their families.

How It Works: When a patient contacts the PAN Foundation, the Foundation offers a grant for co-pay assistance if the individual qualifies. In the meantime, ZERO reaches out to all individuals who contact PAN about financial assistance in order to offer support in the form of education and access to prostate cancer programs. In this way, the two organizations together are able to provide holistic support that helps patients and their families fight the cancer and get through the experience of fighting it as well.

“Our partnership with the PAN Foundation encourages a more holistic approach to patient assistance, meeting the need in the prostate cancer community for both financial and education resources for patients and their families,” said Bearse.

This is a groundbreaking relationship for the PAN Foundation and ZERO to be able to work together in such a fashion. Because both organizations are able to collaborate and focus on their common goal of ensuring that prostate cancer patients have all the help they need today so they have hope for a healthier tomorrow, thousands of lives have been saved.
HELP PROVIDED BY THE PAN FOUNDATION IN 2013

The PAN Foundation provided more than $174 million* in cost-sharing support to more than 86,800 individuals in 2013. The majority of the patients who received assistance from the PAN Foundation in 2013 were enrolled during the same calendar year, while 14 percent enrolled in 2011 or 2012.

Medicare beneficiaries account for 85 percent of the patients helped by PAN, with the rest having private insurance as the primary source of coverage for the therapies supported by one of the PAN Foundation’s Disease-Specific Assistance Programs.

The distribution of the PAN Foundation’s total amount of cost-sharing support follows the same 85:15 ratio of the two primary sources of coverage, Medicare and private insurance.

**Average Cost-Sharing Support per Patient**

During 2013, the average cost-sharing support provided by the PAN Foundation was $2,183, across all patients. The average amount varies by the income of an individual or family, which is expressed as a percentage of the federal poverty level (FPL).

The amount of the PAN Foundation’s support also varied depending on whether the primary source of drug coverage is Medicare or a private insurance.

**Medicare Patients**

Medicare patients helped by PAN received an average of $2,175 in cost-sharing support, with the 57 percent of the individuals with incomes at or below 200 percent of FPL receiving an average of $2,002 in cost sharing support. The amount of cost-sharing support for these individuals reflects about 90 percent of the average support that the PAN Foundation provided to all Medicare patients.

**Privately Insured Patients**

Privately insured patients helped by PAN received an average of $2,234 in cost-sharing support, with 48 percent of the individuals at or below 200 percent of FPL receiving an average of $2,145, or 96 percent of the average support that the PAN Foundation provided to all privately insured individuals.

Among all patients who received PAN assistance, 56 percent had an individual or family income that was at or below 200 percent of the federal poverty level, and 82 percent had an income level which was at or below 300 percent.

**Average Cost-Sharing Support on a Per-Claim Basis**

The PAN Foundation paid an average of $494 for the 345,737 claims for which cost-sharing support was provided. The average amount of PAN support for a Medicare claim was slightly higher at $502 and lower for a private insurance claim which averaged $451.

The majority of claims (62 percent) with cost-sharing assistance provided by the PAN Foundation were associated with therapies dispensed by a specialty pharmacy; the remaining claims were therapies administered in a physician’s office or other outpatient setting.

There are no major differences between Medicare and non-Medicare patients in terms of whether the cost-sharing support is for a specialty pharmacy drug claim or physician-administered drug claim. Nonetheless, 65 percent of the privately insured patients received the PAN Foundation’s support for a pharmacy claim, compared to the 61 percent of the Medicare patients helped by PAN.

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* Out of $174 million, $157 million was paid out in 2013.
management and philanthropic studies. Currently a consultant to nonprofit organizations that focus on providing assistance to underserved communities both domestically and internationally. She is currently the CFO for Population Services International. Ms. Schwartz held leadership positions with the American Red Cross, the American Lung Association, Gannett Corporation, Ernst & Young and Inova Health System.

ALLAN GOLDSTEIN, MD, MPH, FACQ, has a clinical background in internal medicine and consults in the areas of consumerism, patient advocacy, provider performance measurement and the development of innovative primary care delivery systems. He obtained his medical training at the Albert Einstein College of Medicine and received his MPH from Columbia University. Dr. Goldstein is board certified in internal medicine and a fellow of the American College of Physicians.

GRANT D. LAWLESS, RPh, MD, FACQ, is associate professor of clinical pharmacy and pharmacoeconomic policies and is in addition to graduate program director for the master of science degree in healthcare decision analysis at the University of Southern California. Previously, he served as executive director for National Account Managed Care, director of health economics and outcomes research at Angem and executive director for managed care marketing, vice president for medical and pharmacy affairs and chief medical officer for Hythyme Blue Cross Blue Shield in Pittsburgh, PA. Dr. Lawless's professional experience is in both internal medicine and emergency medicine. He is board-certified and a fellow in internal medicine, quality assurance and utilization review as well as addiction medicine. He is also a registered pharmacist with specialty certification in nuclear medicine.

FRED SCHMIDT, MD, is a medical oncologist in private practice with Central Georgia Cancer Care, PC. He is also a clinical assistant professor in the Department of Medicine at the Mercer University School of Medicine in Macon, GA. Dr. Schmidt is active in research to improve patient outcomes. He led the development of the Georgia Center for Oncology, Research and Education, an independent nonprofit organization working to improve cancer care in Georgia by strengthening clinical research throughout the state. His personal research interests include medical oncology and breast, lung and gastrointestinal cancer. He is a past president of the Georgia Society of Clinical Oncology, chair of the Community Oncology Alliance and a recipient of the American Society of Clinical Oncology's Community Research Award.

IAN D. SPATZ, JD, MPH, is a healthcare policy consultant working for a range of for-profit and nonprofit clients. He is a senior advisor to Manatt Health Solutions. In addition, Mr. Spatz founded his own firm, the Black Creek Policy Group. He is also a faculty member in the Department of Health Policy of the George Washington University School of Public Health and Health Services. Previously, he served as vice president for global health policy for Meris St Co, Inc., and he has also worked in the government and nonprofit sectors. Mr. Spatz has degrees from the University of Minnesota, School of Law and the Wofford Wilson School of Public and International Affairs of Princeton University.

NORRIE THOMAS, PhD, is a successful entrepreneur, having founded, launched and managed several pharmacy-managed care companies. Dr. Thomas helped found one of the first pharmacy benefit management companies, Cerclis Pharmacy Advantage. She has held senior management positions at NeolCenters Health Plans, Ariva, Clinical Pharmacy Advantage, Mediplan, PCS, Eli Lily, St. Jude Medical, Schimming-Rough and Magellan Health Services. She holds a bachelor of science, a master of science and a doctorate from the University of Minnesota College of Pharmacy, and she studied as a visiting researcher at the London School of Economics. She is one of the founders of the Academy of Managed Care Pharmacy. Dr. Thomas holds adjunct faculty positions at the University of Minnesota and Drake University, and she is senior fellow with the College of Pharmacy Center for Leading Healthcare Change at the University of Minnesota.

Chair

KIM SCHWARTZ, CPA, has spent most of her career as a financial executive in the area of healthcare, working with nonprofit organizations that focus on providing assistance to underserved communities both domestically and internationally. She is currently the CFO for Population Services International. Ms. Schwartz held leadership positions with the American Red Cross, the American Lung Association, Gannett Corporation, Ernst & Young and Inova Health System.

Vice Chair

MICHAEL O’GRADY, PhD, is a health policy expert with 24 years of experience working with Congress and the Department of Health and Human Services. Throughout his career, he has helped shape significant healthcare legislation on a broad spectrum of issues. He has been influential in the development of key federal policies and programs tackling some of the most complex and controversial health issues facing the country.

Secretary

ANITA PILOTNSKY, PhD, brings to the PAN Foundation more than 20 years of experience in the nonprofit sector. She was affiliated for many years with the Indiana University Center on Philanthropy, where she developed academic programs and taught courses in nonprofit management and philanthropic studies. Currently a consultant to nonprofit organizations in Washington, DC, Dr. Pilotnsky has also served as executive director of the Association for Research on Nonprofit Organizations and Volunteer Action and director of the Foundation Center in DC.

DONALD BARONE, DO, is a course director and associate professor of neurology at the University of Medicine and Dentistry of New Jersey. School of Osteopathic Medicine. A graduate of William Carey College and Philadelphia College of Osteopathic Medicine, Dr. Barone completed his training at the John F. Kennedy Memorial Hospital, the University of Vermont College of Medicine Department of Neurology and the Muscular Dystrophy Association of the Columbia Presbyterian Medical Center. Having now spent almost 30 years practicing neurology, with research interests in multiple sclerosis and neuromyelitis, and 20 years as a member of the Kennedy Health Center Board of Directors, Dr. Barone brings a new genus of expertise to the PAN Foundation’s board of directors.

DAVID BORENSTEIN, MD, is a practicing rheumatologist in Washington, DC, and a clinical professor of rheumatology at the University of Minnesota College of Medicine. He attended Columbia University and Johns Hopkins University School of Medicine, where he completed his medical training. Dr. Borenstein is a past president of the American College of Rheumatology and the Rheumatism Society of the District of Columbia. He has served on the board of directors and executive committee for the Arthritis Foundation, the American College of Rheumatology Research and Education Foundation. In addition, Dr. Borenstein served on the medical advisory board of the Lupus Foundation of Greater Minnesota. He is currently the CFO for Population Services International, a nonprofit organization that focuses on providing assistance to underserved communities both domestically and internationally. She is currently the CFO for Population Services International. Ms. Schwartz held leadership positions with the American Red Cross, the American Lung Association, Gannett Corporation, Ernst & Young and Inova Health System.

CONSTANCE GARCIA, MA, has a broad background in innovating the delivery of healthcare services to high-risk, hard-to-reach populations in a variety of settings, including inner-city hospitals, community-based health centers and the New York City Department of Health. She pioneered the establishment of primary care medical homes in senior citizen centers, public schools and homeless shelters and has held senior positions at CSLA and Bronx managed care corporations, where she was responsible for launching their Medicare line of business. Ms. Garcia served as a consultant in planning a 200-bed hospital and making operational an ambulatory care center in Caracas, Venezuela, where she lived with her family for seven years. Ms. Garcia currently serves as a lecturer for the Department of Health Sciences at Lehman College of the City University of New York.

ANNE GARCIA, MD, is a practicing rheumatologist in private practice with Central Georgia Cancer Care, PC. She is also a clinical assistant professor in the Department of Medicine at the Mercer University School of Medicine in Macon, GA. Dr. Garcia is active in research to improve patient outcomes. She led the development of the Georgia Center for Oncology, Research and Education, an independent nonprofit organization working to improve cancer care in Georgia by strengthening clinical research throughout the state. Her personal research interests include medical oncology and breast, lung and gastrointestinal cancer. She is a past president of the Georgia Society of Clinical Oncology, chair of the Community Oncology Alliance and a recipient of the American Society of Clinical Oncology’s Community Research Award.

MIKE HOLLAND, MD, is a fellowship-trained pediatrician who has been in private practice for more than 20 years. He has served as a consultant in planning a 200-bed hospital and making operational an ambulatory care center in Caracas, Venezuela, where he lived with his family for seven years. Ms. Garcia currently serves as a lecturer for the Department of Health Sciences at Lehman College of the City University of New York.
THE PAN FOUNDATION THANKS YOU!

Through partnerships and the generosity of our donors, the PAN Foundation has been able to assist more than 280,000 patients by providing in excess of $400 million in patient assistance. In 2013 alone, the PAN Foundation provided more than $174 million to nearly 90,000 underinsured patients who are critically or chronically ill. PAN provided patients and their families with financial assistance, helping them gain access to the medications they needed.

Last year was a record-breaking fundraising year for the PAN Foundation. It was also a record-breaking year in the number of patients we assisted and the number of assistance programs we operated. As we celebrate our first 10 years of existence, join us in leaving an even larger footprint in the lives of patients and families across the country. Together, we can continue to be a source of assistance to critically and chronically ill patients and their loved ones, so they can begin the journey toward a healthier tomorrow. Together, we can help lessen the burden on these patients and families as they fight for the lives of their loved ones. Together, we can break even more records and spread even more help and hope.

Learn more about ways to give by visiting www.PANFoundation.org/ways-to-give and consider making a contribution today. You may also consider making your own fundraising page and partnering with the PAN Foundation so that, together, we can help more patients and their families get the financial help they need now. You may designate your donation for a specific assistance program.

AN EXponential INCREASE IN HELP AND HOPE

A short three years ago, we helped fewer than 25,000 patients annually — a number that we have now more than tripled. It sounds great to say that we have tripled the number of patients we provide with help and hope annually, but it really sinks in when you stop thinking of these patients as numbers and start thinking of each and every one of them as the individuals they are, with families and loved ones who treasure their health and life. Through the PAN Foundation’s assistance, three times as many critically or chronically ill patients across the country have gained access to the medications they need to get better. That’s three times as many fathers who get to walk their daughters down the aisle and mothers who have been able to clance with their sons. It’s three times as many spouses and partners who have been able to continue growing old together and siblings who have continued to share in each other’s lives. It’s three times fewer empty seats at the dinner table and missing faces from the annual holiday card. It’s three times more love and light and life — made possible by all of you.

As I pursue this annual report and reflect on the past year, I’m reminded of our phenomenal successes. During the 2013 calendar year, the PAN Foundation touched about 90,000 patients through our nearly 60 patient assistance programs. In 2013, not only were we able to once again increase the number of patients we served, but we also made significant strides in the grant-approval process, making the PAN Foundation the most efficient organization of its kind. In my opinion, this unprecedented level of efficiency, coupled with our new partnerships, explains our success.

The value of patient assistance is ensuring the availability of innovative therapies to patients burdened with economic challenges. As a society, we are fortunate to have seen more than 30 new therapies become available, with several being therapeutic breakthroughs. We are proud to be part of this sector of healthcare and happy we can enable so many patients to gain access to these oftentimes game-changing treatments.

The patient assistance environment experienced significant changes. As we anticipated, the implementation of the Affordable Care Act is resulting in more underinsured patients. Therefore, in addition to a rich research pipeline full of oral medications representing significant clinical advances, we are also feeling the impact of the expanding underinsured population. We very much appreciate the support we continue to receive from our donors. Our new partnerships, discussed in this report, are examples of how we seek new ways to reach more patients and touch more lives.

We anticipate continued growth and should touch the lives of 175,000 patients in 2014. Partnerships will continue to be a significant avenue of growth, enabling us to reach more patients and, through these partnerships, provide more comprehensive support to them and their families.

I want to tip my hat to our Board of Directors and fantastic staff. Along with our partners and loyal supporters, it has been all of you who have made it possible for the PAN Foundation to provide this essential service to patients for the past decade. I look forward to seeing what we can accomplish in 2016 and in the next decade with the devotion of such talented and selfless individuals like all of you.

Sincerely,

Patrick McKercher, PhD, RPh
President, PAN Foundation