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### 2013 Board of Directors and Sponsors

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<thead>
<tr>
<th>Name</th>
<th>Position</th>
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<tr>
<td>Dana A. Kuhn, PhD</td>
<td>President/Co-Founder</td>
<td>Art Wood</td>
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<tr>
<td>Gary W. Cross</td>
<td>Board Chair</td>
<td>Senior Vice President, Marketing/Development</td>
</tr>
<tr>
<td>Russell E. Phillips Jr., CPA, CVA</td>
<td>Board Treasurer</td>
<td>Christopher M. Markwith, CPA, CISA</td>
</tr>
<tr>
<td>Brian L. Fink, JD</td>
<td>Board Secretary</td>
<td>Chief Financial Officer</td>
</tr>
<tr>
<td>Terrie L. Glass, LCSW</td>
<td>Board Member</td>
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<tr>
<td>Edward Z. Lawyer, MD, JD, MS</td>
<td>Board Member</td>
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<td>Mark Edward Mula, RPh</td>
<td>Board Member</td>
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<tr>
<td>Mitch Mula</td>
<td>Board Member</td>
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<tr>
<td>Danielle Nance, MD</td>
<td>Board Member</td>
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### Pharmaceutical, Provider Industries, Corporate, Government and Individual Sponsors

#### 16-20 Years of Donations to PSI
- Baxter Healthcare Corporation
- Commonwealth of VA
- CVS Caremark
- Medco/Accredo

#### 11-15 Years of Donations to PSI
- Bayer Healthcare
- Commonwealth of KY
- Delaware Valley Chapter NHF
- Factor Support Network
- Genzyme

#### 6-10 Years of Donations to PSI
- Alpha Net, Inc.
- American Service and Product
- BioRx
- Boston Hemophilia Treatment Center, Brigham & Women’s Physician Organization, Inc.
- Center for Bleeding and Clotting Disorders (formerly Fairview)
- CSL Behring LLC
- Florida Hemophilia Association
- Grifols
- Hemophilia Association of the Capital Area
- MedPro RX, Inc.
- National Cornerstone Healthcare Services, Inc.
- Novartis Pharmaceuticals Corporation
- Novo Nordisk Inc.
- Pfizer, Inc.

#### 5P Foundation
- Red Chip of Nevada
- Specialty Therapeutic Care
- Texas Central Hemophilia Association Inc.
- The Hemophilia Center of Western PA
- United Way
- University of PA Medical Center
- ViroPharma Incorporated
- Walgreens

#### 1-5 Years of Donations to PSI
- 5P Foundation
- Aegerion Pharmaceuticals
- Alexion Pharmaceuticals, Inc.
- Alliance for Childhood Diseases DBA HTC of Nevada
- ARJ Infusion Services
- Avanir Pharmaceuticals, Inc.
- BDRN, LLC
- Biogen Idec
- CareFusion Corporation
- Colburn-Keenan Foundation Inc.
- Comprehensive Bleeding Disorders HTC
- Coram Hemophilia Services
- Craftsman Screen Printing
- Diplomat Specialty Pharmacy
- Dyax Corporation
- Entertainment Industry Foundation (Right Action for Women)
- Ethical Factor, RX
- Factor Foundation of America
- Good Search
- Great Clips
- Hemophilia Foundation of MN/Dakotas
1-5 Years of Donations to PSI (cont.)

Hemophilia of North Carolina
Hemophilia Outreach Center
Henry Ford Health Systems
International Public Works LLC
Ipsen
Live 4 Smiles LLC
Managed Care Concepts, Inc.
Motivus Healthcare
Nationwide Children’s Hospital
Nature Trade Center, LLC
Nelnet, Inc.
New Venture Fund
Out to Lunch of VA, Inc.
PfRMA
Positudes Inc.

Prometheus Laboratories Inc.
Shire Human Genetic Therapies, Inc.
Sigma-Tau Pharmaceuticals
Simpson Funeral Home & Crematory
South Carolina Department of Health
St. Peter’s Woman of the Elca
The Community Foundation
The Hemophilia Alliance
The Tissue Foundation (anonymous)
The University of California at San Francisco
United Steel Workers International Union
United Therapeutics Corporation
Vanguard Charitable Endowment Program
Verizon Foundation

INDIVIDUAL SPONSORS

Anne Foster
Anthony Adelman
Aretha B. Davis
Donald & Barbara Fleishman
Barbara S. Ekarius
Barry Rule
Beatriz G. Carbajal
Bernard K. Higgins
Berthold Neidhardt
Billy T. and Joyce O. Hackworth
Carl E. Lear
Caroline Habbert
Carolyn A. Hume
Catherine Flores
Catherine Gibson
Cathryn Spelts
Charles & Dolores McClure
Charles & Laureen Young
Charles Archer
Charlotte Worstall
Charmaine Bailey
Cleophus Payne
Connie Bishop
Corinne G. Blandino
Cristiane Naciff
Cynthia Udell
Dr. Dana & Jan Kuhn
Dale Quandt
David Dodd
David Johnson
George & Deborah Johnson
Debra E. Eichler
Debra K. Keen
Debra K. Scott
Denver McDowell
Dolores Damron
Dolores Piesik
Donald Horn
Donald Rosser
Donna L. Lewis
Dorothy A. Creed
Dorothy Aldrich
Doyle & Margaret Smith
Dr. Alla Vash-Margita
Eileen Bostwick
Elizabeth G. Hicks
Ellen J. Zmolek
Elmo H. Salmon
Elver L. & Carol E. Brewer
Erwin Geerdink
Faye Beyer
Frances R. Ricker
Frank Hart
Gail L. Tobin
George & Marjorie Schimonitz
Gerda Tomasino
Hans & Hannelore Schiessl
Hazel B. Gibbs
Hazel M. Myers
Herschel C. & Betty J. Mitchell
Homer D. & Virginia J. Riddle
Hylton Edwards
Isabel Delliño
James G. Cooper
James L. Wellemeyer
James Woolums
Janice Waldmiller
Janis Jones
Jean Dinwiddie
Jeannette B. Deutsch
Jennifer Hood
Jennifer Selig
Jenny Bradley
Jerome Beiderman
Jim Berko
Joe Boyd
John & Suzanne Davis
John & Vivian Trainor
John H. & Kathleen A. Hasche
Josef Polichetti
Joseph M. & Katherine Schaefer
June Gelnet
Karl Eggers
Karlin Schroeder
Kathleen Haberkost
Kelly Allison
Kristine Wisniewski
Larry Cairns
Leila Mount
Leslie Bjorkquist
Lisa Sackuvich
Lloyd Duncan
Luis G. Molina
Margaret L. Poole
Steve & Margarita Downs
Marilyn J. Kimkowski
Marlyn Zuckerma
Marion Koch
Mary Acquino
Mary Claire Havel
Mary Rugen

GOVERNMENT SPONSORS

Years that Grants Have Been Awarded to PSI

Commonwealth of Kentucky
14 Years
Commonwealth of Virginia
17 Years
South Carolina Department of Health
1 Year

Michael McKay
Michelle Gilbert
Michelle Woratayla
Mike Schaper
Nancy Scalia
Neil Vonhof
Norma F. Limberg
Omar Abhari
Patricia A. Ruiz
Patti Corder
Peter J. Ledwedge
Richard J. & Mary A. Fulwiler
Richard Jones
Robert & Nadine Tinsley
Roberta L. Tandy
Robin M. Delain
Ronald Kowalski
Sachin Biliyar
Stanley V. Kline
Susan Clouse
Susan Conser
Susan Turner
Susana Waterman
Thomas & Janet Ecelberger
Thomas Stewart
Timothy Flaherty
Timothy Nugent
Tina R. Gelt
Tracy Garofalo
Vivian Webb
William F. Derma
William Kinney
William O. Buchanan

1-5 Years of Donations to PSI (cont.)

Hemophilia of North Carolina
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Henry Ford Health Systems
International Public Works LLC
Ipsen
Live 4 Smiles LLC
Managed Care Concepts, Inc.
Motivus Healthcare
Nationwide Children’s Hospital
Nature Trade Center, LLC
Nelnet, Inc.
New Venture Fund
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PfRMA
Positudes Inc.

Prometheus Laboratories Inc.
Shire Human Genetic Therapies, Inc.
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Simpson Funeral Home & Crematory
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Barry Rule
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Bernard K. Higgins
Berthold Neidhardt
Billy T. and Joyce O. Hackworth
Carl E. Lear
Caroline Habbert
Carolyn A. Hume
Catherine Flores
Catherine Gibson
Cathryn Spelts
Charles & Dolores McClure
Charles & Laureen Young
Charles Archer
Charlotte Worstall
Charmaine Bailey
Cleophus Payne
Connie Bishop
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Cristiane Naciff
Cynthia Udell
Dr. Dana & Jan Kuhn
Dale Quandt
David Dodd
David Johnson
George & Deborah Johnson
Debra E. Eichler
Debra K. Keen
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Denver McDowell
Dolores Damron
Dolores Piesik
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Doyle & Margaret Smith
Dr. Alla Vash-Margita
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Luis G. Molina
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Steve & Margarita Downs
Marilyn J. Kimkowski
Marlyn Zuckerma
Marion Koch
Mary Acquino
Mary Claire Havel
Mary Rugen

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Commonwealth of Virginia
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South Carolina Department of Health
1 Year

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Thomas Stewart
Timothy Flaherty
Timothy Nugent
Tina R. Gelt
Tracy Garofalo
Vivian Webb
William F. Derma
William Kinney
William O. Buchanan
HOW TO MAKE A TAX-DEDUCTIBLE DONATION

Since 1989, PSI has been fortunate to receive financial support from thousands of donors who simply want to help chronically ill patients afford the cost of their treatment. In 2013, PSI received its sixth consecutive 4-star Charity Navigator rating and was also recognized as a GuideStar silver preferred member for being a leading symbol of transparency and accountability. “The continued success proves our efficiency and leadership in the nonprofit community,” said Dana Kuhn, Ph.D., President and CEO of PSI. “We always aim to be a fiscally responsible organization while increasing the capacity and outreach of our programs to assist patients in affording life-saving treatment.” We hope that you will find it in your heart today to help us continue to provide a financial safety net to the chronically ill. Your contributions impact lives!

Ways to Give

Donate online: PSI welcomes donations of all sizes. Your generous gift will help patients pay for expensive premiums or co-payments they otherwise wouldn’t be able to afford. To make a secure online donation, please visit www.patientservicesinc.org.

Donate by mail: To donate by mail, simply mail your check to Patient Services, Inc. at P.O. Box 5930, Midlothian, Virginia 23112.

Make a donation in someone’s name: An Honorary or Memorial Donation offers a thoughtful way to honor the memory of a loved one or commemorate important occasions while supporting PSI. Your generous donation will directly support PSI’s efforts in “making the gift of health a lifetime benefit™” for all.

Thank You for Your Support!

On behalf of the PSI Board and staff, the Marketing and Program Development Departments would like to express our sincere appreciation for your generous contributions. It is because of donors like you that PSI is able to help patients in their time of need. We truly cherish your support and look forward to providing patient assistance for many more years to come!
By Dana A. Kuhn, Ph.D.

As I write this message, PSI is looking at a 25-year-old history of creating and pioneering the financial patient assistance model, which has improved, maintained, and saved the lives of persons living and struggling with expensive chronic conditions. Despite the economic challenges of our country and the implementations of the Patient Protection and Affordable Care Act (PPACA), PSI has continued to grow and meet the needs of patients. Two factors have contributed to this success: 1) the continued support from the pharmaceutical industry with their understanding that this patient assistance model is vital and the most compliant way to meet the needs of patients, and, 2) the careful strategic planning of PSI to offer creative and compliant programs. In facing the challenges of the PPACA, especially the marketplace insurance plans (Bronze, Silver, Gold, and Platinum plans), PSI has taken steps to help guide patients with making prudent decisions as they choose the best plans for themselves and their families. PSI has partnered with the National Hemophilia Foundation in becoming a Certified Application Counselor (CAC) to officially provide advocacy and guidance to bleeding disorders patients in determining which marketplace policies might be best for their needs.

PSI’s legislative efforts continue to move forward aggressively. One in particular is our HR 1239 bill, which was introduced this year. The bill will provide the means whereby PSI (and other qualified non-profits) would be able to use donated drug, which would be attributed value and processed through the Medicare Part D adjudication process, applying that value against the beneficiaries “true out-of-pocket costs.” This bill would target hundreds of thousands of persons with expensive Part D drugs and allow them to afford the deductible, coinsurance, and “shrinking donut hole” (known as “true out-of-pocket” – TrOOP). This bill would allow adherence to the needed prescription, avoidance of financial devastation, and even prevent suffering ill health and dying. Our Board of Directors met with Majority Leader Eric Cantor this past April and was assured by the Leader that if PSI was successful in obtaining 100 cosponsors, he would request the Centers for Medicare and Medicaid Services (CMS) to pilot a program.

We encourage our readers and supporters to add this bill to their efforts as this will positively impact many people with expensive chronic illnesses and save lives. Additionally, we encourage our readers and supporters to call their legislators asking them to cosponsor HR 1239.

Unfortunately, this year we needed to “place on hold” our wholly-owned subsidiary for-profit, Accesia, Inc. Due to delay in business, and other financial strategic priorities within PSI, the decision was made to postpone the business of Accesia. There is a need in the service provider space for an innovative patient centric hub focusing solely on the patient and their needs. As next year progresses, our Board of Directors will keep this initiative on a focus list of furthering the mission of PSI.

As the fourth quarter came into being, there was media coverage questioning some practices of non-profit financial patient assistance organizations. Although not the center of attention of these articles, PSI was mentioned in these articles as well as our identified Office of the Inspector General positive opinion. PSI was presented as the “gold standard” in compliance with rules, regulations, and guidance in successfully operating a non-profit charitable organization.

In a similar way, a 25-year-old home needs up-keep, renovation, and refurbishing; after 25 years, we have recognized the importance of doing the same in order to launch ourselves into the next 25 years. Thus, we have bolstered our information technology team and initiatives continuing to develop “state-of-the-art” systems to better accommodate patient demand.

On behalf of our independent Board of Directors who dedicate their time and professional expertise to the mission of PSI, we thank all of the public, industry, and individual donors who continue to understand the dilemma patients face financially on a daily basis. Through their non-bias donations they are “Making the gift of health a lifetime benefit.”

We thank you and the patients thank you from the bottom of their hearts.

Dana Kuhn, Ph.D.

Dana A. Kuhn, Ph.D.
President/Founder
By Art Wood

I would say that we are living in interesting times! Several years of economic challenges have increased demand for PSI services. The landscape is changing rapidly with the implementation of the Healthcare Reform Legislation. Preparing for the Marketplace Exchanges in 2014 has consumed quite a lot of attention at conferences and in the media. In the midst of it all, PSI has had a good year when it comes to the assistance we have been able to provide. Certainly, the financial assistance continues to be essential in the lives of the patients we support. Many of them write us sharing heart-wrenching stories of having to make choices between paying for essentials (food, electricity, etc.) or paying for their healthcare. We hear too often that PSI makes the difference between survival or financial devastation. In addition, PSI continues to be on the forefront of advocacy for the patient populations we serve. As you will hear from our Government Relations Director, we have been involved on state and federal levels with coalitions advocating against the specialty-tier increases creating prohibitive out-of-pocket costs for patients. We have introduced federal legislation to help patients with the out-of-pocket costs for Medicare Part D (HR 1239). Much effort has been expended to help our patients deal with the overwhelming burden of increasing healthcare costs.

Amidst the economic challenges of this past year, the twenty-plus assistance programs were able to handle most of the demand due to the generosity of our donors; however, we believe there exists a greater need, which we have not been able to capture. The patient experience continues to improve and be more efficient due to the ongoing work to enhance the electronic processing of applications. Referral agencies are able to utilize electronic portals to increase the speed to therapy for the patients. PSI will be devoting the next year to further update our IT systems in order to prepare for upcoming initiatives in 2014 and beyond.

Another resource being offered by PSI has been a number of webinars on various topics. Webinars have been offered on how to better process patient applications, Healthcare Reform issues, Insurance issues, and helping various patient communities with questions. PSI looks for ways to provide resourcing to our donors, referral hubs, and patients. If you have any suggestions for ways we can better help you, please don’t hesitate to contact us.

This year we will be seeking to update our IT systems in order to prepare for upcoming initiatives in 2014 and beyond.

In the midst of a culture, which is more carefully scrutinizing patient assistance programs, PSI continues to carry a high standard of compliance. In addition to our Office of Inspector General Opinion (02-01), which provides guidance for the way PSI operates, our 4-star Charity Navigator rating was awarded again in 2013. This rates us on the basis of a number of factors including transparency, administrative expenses, fiscal responsibility, and commitment to our mission among other things. Additionally, PSI became a Silver Participant member of GuideStar. We are proud to have twenty-five years of being a pioneer and standard bearer for the patient assistance industry.

As noted above, this next year (2014) will mark the twenty-fifth anniversary of PSI. We will be communicating more about this during the course of the year; however, PSI stands proud at the work, which has been accomplished with the help of generous donors, faithful partners, and patient advocates. As we move into the next twenty-five years, our hope is that we will continue to be the leading voice in impacting how patient assistance is provided both on a state and federal level. We look forward to working with you in the future.

Art Wood  
Senior Vice President  
Marketing and Development
2013 was a banner year for PSI Government Relations and ushered in a new wave of activity on the state level as PSI became a nationwide leader on specialty-tier legislation. With implementation of the Affordable Care Act (ACA) underway, the focus shifted to the state level as new access and affordability challenges emerged for patients. Through department efforts and the amazing work of the PSI Patient Coalition, this past year was our most successful to date!

2013 State Activities

- Secured the integrity of our state public/private partnerships. These programs provide health insurance premium assistance to patients, which is crucial to access, as many of our patients utilize newly created marketplace plans.

- Medicaid Expansion. PSI worked on the ground in several states to promote expansion as a positive new form of coverage for our patients.

- Combated the affordability challenge presented by prescription drug “specialty-tiers,” which require patients to pay a percentage of cost as opposed to a flat-dollar amount for their prescription medication. PSI led the charge in Virginia, Kentucky, South Carolina, and other states on this important issue and is now seen as a nationwide expert on the subject.

- Minimized increased regulation surrounding state navigators and Certified Application Counselors (CACs), two entities designed to assist patients applying for coverage through newly created health marketplaces.

- The department was proud to assist patient groups across the country plan their advocacy days by finding out what issues matter most to them, providing advocacy training, and communicating that message effectively to legislators.

PSI Government Relations Advocates for Greater Access to Needed Treatments and Therapies

The role of the Patient Services Incorporated (PSI) Government Relations Department is to advocate for greater access to needed treatments and therapies for our disease community partners. The Government Relations team at PSI accomplishes that by building partnerships, advocating legislation, and educating patient groups. In 2013, the Government Relations team expanded our influence and advanced our priorities.

On Capitol Hill, PSI worked on the introduction of H.R. 1239, The Accessing Medicare Therapies Act. This legislation, introduced by Congressman Bill Cassidy (R-LA) and Congresswoman Doris Matsui (D-CA), was the culmination of two years of advocacy to promote the PSI TrOOP Rx program. This legislation allows PSI to advance the program to allow donated treatments to count towards out-of-pocket expenses for Medicare Part D beneficiaries. The ultimate goal being that patients move through the tiers of the benefit without having any disruption in care because they cannot afford the treatment costs. The Government Relations team met with hundreds of Congressional offices throughout the year to promote this needed legislation. The culminating event was the 2nd Annual PSI Congressional Reception where we hosted 200 Congressional staff, patient advocates, and our industry partners. PSI hosted four members of Congress – Congressman Bill Cassidy (R-LA), Congresswoman Doris Matsui (D-CA), Congressman David McKinley (R-WV), and Congresswoman Lois Capps (D-CA). PSI President Dana A. Kuhn, Ph.D., conferred the inaugural PSI President’s Award to IDF President Marcia Boyle for her many years of service to the Immune Deficiency Community.
In 2013, PSI has built our partnership base by developing relationships with several important patient-centered coalitions. The Government Relations team continues to participate in the Coalition for Accessible Treatments, which advocates for the passage of H.R. 460, The Patient’s Access to Treatment Act. PSI assisted in lobbying for cosponsors for this important legislation, which would change the practice of specialty tiers in commercial insurance, which transfers high coinsurance costs to patients. PSI also joined the Patients Equal Access Coalition (PEAC), which promotes the advance of H.R. 1801, The Cancer Drug Coverage Parity Act of 2013. This legislation would require group and individual health insurance coverage to provide for coverage oral chemotherapy treatments as those administered by a health care provider. Additionally, PSI is a member of the MapRx Coalition and the America Plasma Users Coalition. We have participated in National Hemophilia Foundation Washington Lobby Day, the Immune Deficiency Foundation Advocacy Day, as well as the GBS/CIDP Advocacy Day.

Our team has traveled across the United States educating patients on the implementation of the Affordable Care Act. Through weekly updates and other newsletter articles, PSI has worked to provide educational information to patients. In the fall, PSI became a Certified Application Counselor (CAC) Designated Organization so that PSI could receive specific training from the Center for Consumer Information and Insurance Oversight (CCIIO). PSI can be an umbrella CAC for individuals, social workers at hemophilia treatment centers, and other hemophilia organizations to assist patients to choose the right plan for them and complete the application.

The PSI Government Relations team is dedicated to the PSI mission laid by our founder to help remove barriers to access. That is the vision that drives us every day. We look forward to a productive 2014.

Through department efforts and the amazing work of the PSI Patient Coalition, this past year was our most successful to date.
A MESSAGE FROM THE DIRECTOR

In 2013, PSI experienced much positive growth and changes. The PSI Assistance Validation Portal was created and allows patients, providers, or pharmacies to securely confirm patient assistance status. The feedback regarding this new tool has been very positive, and many providers and pharmacies utilize the tool prior to shipping medication or rendering medical services.

In regards to technology, our website was updated to list the current status of active PSI programs under “Assistance Available” on the main PSI menu. This provides applicants or providers helpful information prior to initiating the application process. Real-time updates inform the public whether or not PSI is accepting applications for a program.

We continued to receive positive feedback regarding the income prescreening tool located on the home page of our website. This feature allows the applicant or referring entity to enter the total household income for the most recent year along with a few other pieces of patient information to determine, based on the information entered, if the applicant would qualify for the PSI program to which they are applying.

These improvements have proven to be successful and are greatly appreciated by industry, patients, and community members.

Initiatives in 2014:

As we strive for continued efficiencies in 2014, we will be working on implementing a Document Management System (DMS) that will not only allow efficiency in operation, but also allow patients to upload documentation directly through the patient portal. This system will securely capture faxes and forms and allow us to save copies of the documents as images in the patient file. The quick retrieval of the necessary documents will help our patient representatives to better serve our patients. Additionally, we will continue to work towards improving our website so that it becomes more user-friendly. Our priority is to deliver exceptional service with ease.

In service,

Mike Herbert
Director of Operations and Program Reimbursement

Accounting and Quality Assurance
Left to right, back row: Daniel Wise, Chris Markwith, Tammy Martin, Lamont Brown.
Left to right, front row: Christine Moran, Renee Simmons, Michelle Robinson.
# PSI Traditional Programs (Active Patient Profiles)

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<td>AIDS/HIV</td>
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<td>Average age of patient ........................................ 57</td>
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<td>Average income of patient population .................. $21,487.28</td>
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<td>Clostridium Difficile (C Diff)</td>
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<td>Chronic Inflammatory Demyelinating Polynueropathy (CIDP)</td>
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<td>Chronic Myelogenous Leukemia (CML)</td>
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<td>Corneal Crystal Accumulation in Cystinosis</td>
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<td><strong>Cutaneous T-Cell Lymphoma (CTCL)</strong></td>
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<td><strong>Cystic Fibrosis (with Pseudomonas)</strong></td>
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<td><strong>Factor Support Network (FSN) Bleeding Disorders Co-payment Program</strong></td>
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<td><strong>Gaucher Disease</strong></td>
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<td><strong>Hemophilia Bayer Co-pay/Co-insurance Assistance Program</strong></td>
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<td><strong>Homozygous Familial Hypercholesterolemia (HoFH)</strong></td>
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<td>64</td>
<td>$42,027.20</td>
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<td><strong>Inhibitors in Bleeding</strong></td>
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<td><strong>Kentucky Bleeding Disorders</strong></td>
<td>42</td>
<td>$16,364.44</td>
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<td><strong>MPS 1</strong></td>
<td>24</td>
<td>$43,781.94</td>
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<td><strong>NCHS Bleeding Disorders Co-payment</strong></td>
<td>28</td>
<td>$44,411.78</td>
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<td><strong>Pema</strong></td>
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<td><strong>Pompe</strong></td>
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<td><strong>Pseudobulbar Affect (PBA)</strong></td>
<td>68</td>
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<td><strong>Virginia Bleeding Disorders</strong></td>
<td>26</td>
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In 2013, PSI continued to improve its core offerings through tactical initiatives in our premium and copayment assistance programs. Improvements to our online application, portals, and internal systems have enabled us to assist more patients in more ways.

The PSI Payment Assistance Card continues to yield benefits to our patients receiving copayment assistance. We entered 2013 launching the conditional assistance model, which allows patients to receive assistance sooner.

As the original premium and copayment patient assistance foundation, PSI continues to blaze trails. Inspired by the enthusiastic support of leadership and our Board of Directors, exciting technology initiatives are underway in 2014.

These initiatives will yield results, which demonstrate our continued commitment to our patients, donors, and constituents nationwide.

Our patients will experience improved conveniences, accessibility, and communication. Our donors will enjoy access to new information and improved collaboration opportunities. PSI will observe results across the board to better enable us to fulfill our mission and remain the standard in patient assistance and advocacy offerings.

By carefully surveying the technology marketplace and landscape, we are making thoughtful choices, which will increase our capabilities enterprise-wide. New web offerings will facilitate information exchange with patients and donors. Information management systems and robust reporting will help provide deeper insight and help govern funding decisions. The efficiency and capacity gains will provide PSI with an agile information technology system prepared for growth and built for performance leading us into the next 25 years.

PSI’s Information Technology department remains steadfast in pursuit of continual process improvement. Our commitment is to provide PSI the finest patient assistance platform available.

Information technology is our vocation, but patient assistance is our passion. Our driving principle is to be good stewards of the organization for the benefit of our patients.
By Bill Leach, ACCESS Manager and Attorney Hearings Supervisor

**PSI-ACCESS® Experiences Another Successful Year**

PSI-ACCESS® resolved 87 disability cases in 2013; we had 91 active clients with pending claims at the end of the year. Our success rate was 74 percent in the cases that we completed. The disease states that we served in 2013 were as follows:

- Hemophilia ................................................................. 46%
- Alpha-1 Antitrypsin Deficiency ................................. 23%
- Primary Immune Deficiency .................................... 18%
- von Willebrand’s .......................................................... 6%
- Hereditary Angioedema ............................................. 2%
- IVIg-reactive neurological and other disorders ............. 2%
- Pulmonary Arterial Hypertension .............................. 2%
- Other ........................................................................... 1%

We began offering the ACCESS Legal Support Hotline this year to provide expanded counseling to the bleeding disorder and Alpha 1 communities on a range of issues related to accommodations at school or work, medical leave, and health care coverage. Our staff has also trained to become Certified Application Counselors for the Affordable Care Act.

As we move forward, we will continue to explore expansion of our range of services and to look for other communities that could benefit from them.

---

**PSI ACCESS TEAM**

William Leach  
ACCESS Supervisor

Terry Staletovich

Kathy Crowe

Stephanie Rosa
By Chris Markwith, CPA, CISA

With the continued implementation of healthcare reform in 2013, PSI saw significant growth in the need for our services. Our donors’ generous support allowed PSI to have another successful year helping over 18,451 patients by providing $63.3 million in program services. During 2013, PSI increased the number of patients receiving financial assistance by 5.3 percent and the average amount of assistance received by each patient increase 10.1 percent.

PSI continues to be diligent in our efforts to reduce costs and increase assistance to patients. The PSI Board and management are committed to being faithful stewards of the funds donated to our programs. As a result PSI maintained low operational costs and increased direct assistance to patients by 21 percent. For 2013, we are proud to report that 93.5% of every dollar expended was for program services to patients.

The financial information here provides a brief overview of our finances for 2013. Please refer to our audited financial statements for a full set of statements and accompanying footnotes for a more complete understanding of our financial strength. The audit report by Keiter is available upon request by calling 1-800-366-7741 or visiting our website: https://www.patientservicesinc.org.

Please let me thank you for your generous support and compassion for the patients that we serve.

Sincerely,

Chris Markwith
Christopher M. Markwith, CPA, CISA
Chief Financial Officer

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**Summary Statement of Financial Position**

*December 31, 2013 and 2012*

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<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Assets</td>
<td>$85,908,432</td>
<td>$70,343,148</td>
</tr>
<tr>
<td>Property and Equipment</td>
<td>2,427,757</td>
<td>2,678,281</td>
</tr>
<tr>
<td>Other Assets</td>
<td>2,073,105</td>
<td>1,593,892</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$90,409,294</strong></td>
<td><strong>$74,615,321</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>LIABILITIES AND NET ASSETS</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Current Liabilities</td>
<td>$946,637</td>
<td>$1,405,316</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>704,124</td>
<td>856,913</td>
</tr>
<tr>
<td>Unrestricted net assets</td>
<td>14,258,331</td>
<td>11,849,073</td>
</tr>
<tr>
<td>Temporarily restricted net assets</td>
<td>74,500,202</td>
<td>60,504,019</td>
</tr>
<tr>
<td><strong>Total Liabilities and Net Assets</strong></td>
<td><strong>$90,409,294</strong></td>
<td><strong>$74,615,321</strong></td>
</tr>
</tbody>
</table>

- 16 -
The financial information reported here is for PSI only and does not contain consolidated subsidiary information.

A complete copy of the Consolidated Financial Statements with a certified report from our independent auditor, Keiter, is available by calling 1-800-366-7741 or by visiting our website, www.patientservicesinc.org.

## Statement of Activities
### December 31, 2013 and 2012

### REVENUES AND OTHER SUPPORT

<table>
<thead>
<tr>
<th></th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions</td>
<td>$8,311,855</td>
<td>$73,795,489</td>
<td>$82,107,344</td>
<td>$61,302,798</td>
</tr>
<tr>
<td>Fees for contracted services</td>
<td>202,657</td>
<td>1,098,169</td>
<td>1,300,826</td>
<td>2,085,728</td>
</tr>
<tr>
<td>Interest income</td>
<td>30,929</td>
<td>–</td>
<td>30,929</td>
<td>31,857</td>
</tr>
<tr>
<td>Miscellaneous income</td>
<td>25,166</td>
<td>–</td>
<td>25,166</td>
<td>23,531</td>
</tr>
<tr>
<td>Gain on Investments</td>
<td>128,736</td>
<td>–</td>
<td>128,736</td>
<td>73,237</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>60,897,475</td>
<td>(60,897,475)</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td><strong>Total revenues and other support</strong></td>
<td><strong>69,596,818</strong></td>
<td><strong>13,996,183</strong></td>
<td><strong>83,593,001</strong></td>
<td><strong>65,517,151</strong></td>
</tr>
</tbody>
</table>

### EXPENSES AND LOSSES

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program services</td>
<td>63,341,649</td>
<td>–</td>
<td>63,341,649</td>
<td>52,578,742</td>
</tr>
<tr>
<td>Fundraising</td>
<td>1,093,041</td>
<td>–</td>
<td>1,093,041</td>
<td>1,007,476</td>
</tr>
<tr>
<td>Management and general</td>
<td>3,298,901</td>
<td>–</td>
<td>3,298,901</td>
<td>3,212,185</td>
</tr>
<tr>
<td><strong>Total expenses and losses</strong></td>
<td><strong>67,733,591</strong></td>
<td><strong>–</strong></td>
<td><strong>67,733,591</strong></td>
<td><strong>56,798,403</strong></td>
</tr>
<tr>
<td>Change in net assets</td>
<td>1,863,227</td>
<td>13,996,183</td>
<td>15,859,410</td>
<td>6,718,748</td>
</tr>
</tbody>
</table>

### NET ASSETS

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>2013</th>
<th>2012</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning of year</td>
<td>12,395,104</td>
<td>60,504,019</td>
<td>72,899,123</td>
<td>65,634,344</td>
</tr>
<tr>
<td><strong>Ending</strong></td>
<td><strong>$14,258,331</strong></td>
<td><strong>$74,500,202</strong></td>
<td><strong>$88,758,533</strong></td>
<td><strong>$72,353,092</strong></td>
</tr>
</tbody>
</table>
Assistance by Top 15 States

- Florida: $5,383,002
- California: $3,720,979
- Texas: $4,721,122
- Pennsylvania: $3,439,050
- Ohio: $2,885,788
- North Carolina: $2,395,399
- Virginia: $2,380,349
- Illinois: $2,256,782
- New York: $1,303,814
- Michigan: $1,800,103
- Arizona: $1,761,264
- Georgia: $1,625,474
- Missouri: $1,592,615
- Indiana: $1,589,817
- Tennessee: $1,523,471

Assistance by Country

- U.S.A.: $62,431,324
- Puerto Rico: $308,518
- Guam: $253,779
- Canada: $328,264
- Virgin Islands: $19,864
- Total Assistance: $63,341,649

Functional Expense

- Program Assistance: 53.5%
- Management & General: 43.7%
- Fund Raising: 1.8%

Assistance by Program Area

- Enzyme Programs: 63.8%
- Oncology Programs: 23.0%
- Protein Deficiency Programs: 13.0%
- Other Programs: 1.4%

Contribution History

- 2013: $62,197
- 2012: $61,303
- 2011: $68,345
- 2010: $47,394
- 2009: $59,477

- Contributions
- Other Revenue

Thousands
In 2013, PSI offered three (3) patient assistance programs in public/private partnership with Virginia, Kentucky, and South Carolina. The Virginia Bleeding Disorders Program offers assistance with health insurance premiums for individuals with Hemophilia or von Willebrand Disease. By providing this assistance, individuals are able to maintain their health insurance and access essential comprehensive care. As a result, there is significant cost avoidance for the state.

In collaboration with the Children with Special Health Care Needs Programs, patients were also offered assistance with health insurance premiums in Kentucky and South Carolina. The partnership with Kentucky went into its 13th successful year of providing assistance for patients with Hemophilia, von Willebrand Disease, and Cystic Fibrosis. To further assist patients in obtaining adequate health insurance coverage, PSI became a Certified Application Counselor (CAC) organization in Kentucky to certify its staff and volunteers as CACs. The certification allows staff to provide information about health plan options, assist with applications for coverage in the health insurance exchange, and facilitate enrollment into health plans.

The state programs serve as a model for balancing comprehensive patient care with fiscal responsibility.

By Tiara Green, PSI State Program Manager

Traditional PSI Programs Department
Back row, left to right: Mike Herbert, Linda Little, Elia Perkins, Kyle Wentz, Sharon Whittle, Eric Conners, Amy Ollett, Emily Ledbetter. Middle row, left to right: Stephanie Conners, Tiara Green, Germaine Mahan, Dawn Zoppos, Maisha Harris, Sharon Johnson-Frye, Dale Fields. Front row, left to right: Dawn McCall, Peggy Trent, Micki Mason, Barbara Cope, Jennifer King.
Dear PSI Staff,

There are no words that are adequate enough to express how much we appreciate all the help you have given to my husband over the last few years. You are truly sent from God. We had exhausted our savings because of his CML and had nowhere to turn. If we ever get any money, it will be donated to PSI. We can never repay all you have done for us. God bless you and your organization.

Sincerely,
CML Patient

Dear Staff,

On Thanksgiving I thought I’d like to thank PSI for all your help these past 10 months. I’ve been struggling with illness and high medical expenses for many years and was recently diagnosed with CVID. Receiving IGG has been a life-saving and life-changing event for me. As a music teacher, my work involves contact with children on a daily basis, and I frequently catch whatever virus is going around from my students. The result seems always to become a major infection with months to recover. I have had five sinus surgeries and many hospital stays over the years. Now with the new diagnosis and treatment, I have hope for a better life. The premium assistance has been a great blessing to me.

Thank you and God bless you,
PSI Patient

Dear PSI,

Our son was diagnosed, unexpectedly, with Severe Hemophilia A at a week old. At a year old, he was diagnosed with Inhibitors. At two years old, he was diagnosed with a congenital heart defect. The medical costs are staggering, and the stress it puts on our lives is, at times, unbearable. PSI’s reimbursement program has helped us tremendously. It takes a little of the burden off our shoulders. We cannot thank PSI enough for their support. God bless you!

The Davis Family

Dear PSI,

My husband was diagnosed with CML at the early age of 38 years old. As I was sitting in the pharmacy drive-thru, I was told the cost of the prescription. I sat and cried and knew that we would never be able to continue the payments for his treatment. Thanks to the help of his doctors for giving us the information about PSI, we were able to get the help that we needed. I don’t know what we would have done without the assistance of PSI. I can’t thank you enough for saving my husband’s life. Today he is able to work, watch his children grow up and share all the milestones in our lives. We will be married 20 years this year – and we count our blessings every day. Thank you for making it all possible.

Wife of PSI CML Patient

* PSI has obtained consent to disclose patient names and stories in all literature and marketing materials. Patients who wish to share their story and/or image are required to sign a legal authorization form granting permission. A patient may revoke their authorization at any time by notifying Patient Services, Inc. in writing.
PATIENT TESTIMONIALS

PSI Staff,

There are not enough words to convey my immense gratitude for your help. I’m 81 years old and have been diagnosed with CML. Currently, I’m in my seventh year of remission. Thanks again for your assistance. I couldn’t have done it without you!

Regards,

PSI CML Patient

Dear PSI Staff,

I’m 80 years old and am writing about my wife of 51 years. She has had several types of cancer over the past 15 years. First she had skin cancer, and she beat it. Next she had breast cancer and beat it. Then she had a tumor on her leg that was originally treated as arthritis. Later we came to find out that it was cancer, and she had to have her leg amputated. My wife has never cried or blamed anyone for all of her cancers. In the past 2 ½ years, she was diagnosed with leukemia – this was the first time she has ever cried. She didn’t cry because she had leukemia, but because of the cost of the drug that she had been prescribed for treatment. The cost was $5,000 a month, yet she only receives $400 monthly.

Around the time we found out how much her treatment would cost, PSI came into the picture. She was approved for assistance, and PSI pays for her medicine. She is doing great thanks to your organization. Please share my story with others so they can learn about Isabel and how PSI and the companies who donate to PSI are helping her pay for her medicine. Thank you, I pray for all of you at PSI and those who make her medication.

Sincerely,

Husband of CML Patient

Hello,

I was diagnosed with CML in 2009, and the same month I was informed that I had breast cancer. Being overwhelmed with both of these diagnoses, and later learning the medication costs and out-of-pocket expenses that I would have for CML alone, I didn’t know where to turn. Although I have insurance, there was no doubt that in time, my monthly medication costs would drain my savings.

While visiting my oncologist, I mentioned this financial dilemma to the nurse. She then told me about PSI.

God bless you for helping those of us with chronic illnesses.

PSI Facebook fan, Kay

PSI Staff,

In October 2012 I was diagnosed with GIST – a very rare form of cancer. I was 54 years old and not sure what I was going to do when I found out that my medication was $6,500 monthly. My insurance pays 50 percent of my medication, and I spent one month looking for some kind of patient assistance to afford my portion. The drug company of my medication would have helped me, but I found this fantastic company called PSI. I don’t know what I would have done without you! Thank you to all the staff for their boundless help.

Very thankful and grateful,

GIST Patient
For more than two decades, PSI, a national non-profit charitable organization, has successfully offered a “safety net” to persons living with expensive chronic conditions and those who fall through the cracks of government health care programs, often helping them avoid financial ruin. PSI provides peace of mind to our clients by:

- Locating health insurance solutions in all 50 states
- Subsidizing the cost of premiums
- Providing pharmacy and treatment co-payment assistance
- Assisting with Medicare Part D co-insurance
- Providing advocacy with applying for SSI and SSDI through the PSI-A.C.C.E.S.S.* program
- Providing health care reform information through our Health Policy newsletters, daily policy updates on Facebook and Twitter, presentations, and PSI Patient Coalition Advocacy
- Helping patients get their medications quickly and easily through the PSI Secondary Payment Card Program

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2013 Disease Programs

- ACCESS
- Alpha 1 Antitrypsin Deficiency
- American Service and Product Bleeding Disorders Co-payment Program
- Baxter Alpha 1 Antitrypsin Deficiency Co-pay/Coinsurance Assistance Pilot Program
- Bayer Kogenate® FS Co-pay/Co-insurance Assistance Program
- Bone Metastases
- Breast Cancer Screening
- Clostridium Difficile
- Corneal Cystinosis
- Cystic Fibrosis w/ Pseudomonas Aeruginosa (CFP)
- Chronic Inflammatory Demyelinating Polyneuropathy (CIDP)
- Complement-Mediated Diseases (CMD)
- Chronic Myeloid Leukemia (CML)
- Cutaneous T-cell Lymphoma (CTCL)
- Diplomat Specialty Pharmacy Bleeding Disorders Co-payment Program
- Fabry Disease
- Factor Support Network Bleeding Disorders Co-payment Program
- Gastrointestinal Stromal Tumors (GIST)
- Hemophilia
- Hemophilia Co-payment/Co-insurance Assistance Pilot Program
- Hereditary Angioedema
- Inhibitors in Bleeding
- Kentucky Bleeding Disorders
- Metastatic Melanoma
- Metastatic Renal Cell Carcinoma
- Mucopolysaccharidosis 1 (MPS1)
- National Cornerstone Healthcare Services Bleeding Disorders Co-payment Program
- Pseudobulbar Affect (PBA)
- Primary Immune Deficiency Disease (PI)
- Pleural Effusion/Malignant Ascites
- Pompe Disease
- South Carolina Bleeding Disorders Program
- Virginia Bleeding Disorders Premium Assistance (VBDP Premium)
- Virginia Bleeding Disorders Copay Assistance (VBDP Copay)
- Virginia Medicare Part D Assistance Program (VA MPAP)
- von Willebrand Disease
**PSI Milestones**

- Approved for 501 (c)(3) status by the IRS (1992, 1999).
- Four-Star rating with Charity Navigator, America’s largest independent charity evaluator.
- Received a positive opinion from the U.S. Department of Health and Human Services Inspector General (2002).
- Received a positive opinion from CMS to assist Medicare Part D recipients with “Donut Hole” expenses (2004).
- Awarded the State Pharmaceutical Assistance Program (SPAP) for Virginia and offers Medicare Part D direct assistance counting toward TrOOP assistance to HIV/AIDS patients.
- Developed public-private partnerships with state drug assistance programs beginning in 1996. Provide premium assistance programs with VA, SC, PA and KY. PSI is VA’s SPAP for their HIV/AIDS program.
- Provide Social Security and disability representation to patients in addition to helping patients navigate and obtain Medicare/SSDI through the PSI A.C.C.E.S.S.* Program.
- Became a GuideStar Silver Preferred Member for being a leading symbol of transparency and accountability (October 2013).
- Pioneer in patient assistance field.

**The Gold Standard Among Non-Profit Charitable Organizations**

“Making the gift of health a lifetime benefit”®