

**LEISHLine Financial Aid Fund
Program Disclaimer**

The LEISHLine Financial Aid Fund is an exclusive program of and fully funded by the Begin Again Foundation, in collaboration with our non-profit service partner, Patient Advocate Foundation.

Patient Advocate Foundation's ("PAF's") LEISHLine Financial Aid Fund provides financial assistance to patients who have been diagnosed with Toxic shock syndrome (TSS), Sepsis and/or Acute Respiratory Distress Syndrome (ARDS) and who are in active treatment or have been in active treatment within the past six (6) months. In order to qualify for financial assistance from the LEISHLine Financial Aid Fund, the patient must (1) have been diagnosed with Toxic shock syndrome (TSS), Sepsis and/or Acute Respiratory Distress Syndrome (ARDS); (2) be in active treatment or have been in active treatment within the past six (6) months; and (3) meet the financial eligibility requirements. The LEISHLine Financial Aid Fund provides a grant award to assist patients with expenses related to transportation, housing, utilities, and food/nutritional needs.

PAF will not consider the identity of any physician, provider, supplier of items or services, donor, drug therapy, services or supplies being utilized, or the referral source when assessing whether an applicant is qualified for financial assistance through the LEISHLine Financial Aid Fund. Under no circumstances will PAF recommend or refer a patient to any donor, provider, supplier, or product.

Qualifying patients are provided a one-time grant at the time they are approved for assistance from the LEISHLine Financial Aid Fund. Financial assistance through the LEISHLine Financial Aid Fund is provided on a first come, first serve basis to the extent the Financial Aid Fund has capacity to provide assistance. Enrollment in the LEISHLine Financial Aid Fund, 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 transportation, housing, utilities, and food/nutritional needs. PAF has no contractual obligation to provide such assistance to qualified enrollees.

Assistance from the LEISHLine 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.

Patient Advocate Foundation reserves the right to request additional information to verify compliance with program eligibility guidelines. Failure to provide 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.

Patients' contact information may be used in the future to share printed and/or electronic communications from PAF. If the patient does not wish to receive print and/or electronic communications from PAF, he/she may contact the program at 1-855-824-7941 and request to have his/her contact information removed from the mailing list.

Patients' data may also be used in de-identified aggregated reports. This means that information and data patients provide to PAF may be combined with other patients' data to prepare reports analyzing patient needs and the LEISHLine Financial Aid Fund. PAF will only use de-identified patient data, i.e., patient data where all identifying data terms like the patient's name, identifying numbers, etc. have been removed.

By accepting a grant from the LEISHLine Financial Aid Fund patients are attesting that they agree to use the grant funds only for expenses related to transportation, housing and lodging, utilities or food/nutritional needs. PAF and the Begin Again Foundation reserve the right to request documentation from patients demonstrating that the grant funds have been used only for expenses related to transportation, housing and lodging, utilities or food/nutritional needs. (e.g., receipts).