Association of Community Cancer Centers

2014-2015 Annual Report
It has been an honor to serve as ACCC President during a year that has seen unprecedented change in both cancer treatment as well as payment and delivery models. For my presidential theme, I chose quality in cancer care. ACCC’s goal in 2014-2015 was not to create new quality initiatives, but to identify areas in which ACCC could play a key role in the delivery of quality care. I would like to share a few examples of how ACCC succeeded in meeting this goal over the past year.

In 2014, six ACCC Innovator Award winners showcased quality-driven initiatives, presenting replicable approaches to programs nationwide. ACCC fostered recognition and a broader dissemination of these successful innovations.

ACCC’s launch of the Institute for Clinical Immuno-Oncology will bring us to the forefront as the premier source for immuno-oncology implementation resources for the multidisciplinary cancer care team.

ACCC’s 2014 Institute for the Future of Oncology forum white paper “Communicating Quality in Oncology” examined how quality is being communicated to different stakeholder groups—patients, payers, and other providers—and identified challenges and areas for improvement.

One of ACCC’s most valuable data-driven tools for benchmarking quality is the annual “Trends in Cancer Programs” survey. One key finding from the 2014 survey is that members are proactively developing their own guidelines to help measure and track quality.

Through ACCC’s robust education initiatives—from those focused on improving care in less common cancers to the Financial Advocacy Network to the Learning Labs for Process Improvement—ACCC member-to-member sharing of effective practices, process improvements, and quality measures is another way we effectively promoted quality care.

A key role that ACCC plays in the quality journey is fostering peer-to-peer conversations through ACCCExchange, at national and regional meetings, and through collaborative advocacy efforts with other stakeholders.

Thank you for allowing me to guide you on this journey as ACCC President.

Becky L. DeKay, MBA
President, ACCC
Welcome New Members!

New Cancer Program Members in 2014-2015
(as of March 3, 2015)

- Advocate Lutheran General Hospital, Lutheran General Cancer Institute, Park Ridge, IL
- Bakersfield Memorial Hospital, Dignity Health Bakersfield Infusion Center, Bakersfield, CA
- Bismarck Cancer Center, Bismarck, ND
- Cancer Centers of Northern Arizona, Sedona, AZ
- Christus Health, Irving, TX
- HCA VA Cancer Network, Spotsylvania Regional Cancer Center, Fredericksburg, VA
- IU Health Cancer Center Bloomington, Bloomington, IN
- Katmai Oncology Group, Anchorage, AK
- Kentucky One Cancer and Blood Specialist, Louisville, KY
- Maryland Oncology Hematology, Columbia, MD
- New Mexico Oncology Hematology Consultants, Ltd., Albuquerque, NM
- North Mississippi Medical Center, Inc., NMMC Oncology Services, Tupelo, MS
- North Shore Hematology/Oncology Associates, P.C., East Setauket, NY
- Ohio Valley Medical Center, Wheeling, WV
- Polyclinic Cancer Program, Seattle, WA
- Regional Cancer Care Center, Berlin, MD
- Rockford Memorial Hospital Cancer Center, Rockford, IL
- St. Joseph Regional Cancer Center, Lewiston, ID
- Summit Physician Services, Summit Cancer and Hematology Services, Chambersburg, PA
- Tampa General Hospital, Tampa, FL
- The Jewish Hospital Mercy Health, Cincinnati, OH
- Touro Infirmary, Touro Cancer Program, New Orleans, LA
- Tower Hematology Oncology Medical Group, Beverly Hills, CA
- UCSF Helen Diller Family Comprehensive Cancer Center, San Francisco, CA

New Chapter Members in 2014-2015
(as of March 10, 2015)

- Association of South Carolina Oncology Managers (ASCOM)
- Georgia Society of Clinical Oncology (GASCO)
- Premier Oncology Hematology Management Society (POHMS)
Building Connections

Collaboration among disciplines is key in treating cancer patients, and ACCC’s multidisciplinary membership mirrors the team approach. ACCC facilitates connections across professions, and together members achieve powerful results.

ACCC helps foster member connectivity through online forums, social media, and most effectively through face-to-face meetings conducted across the country. Members ask questions, share successes, and deliberate issues, putting their discipline-specific knowledge to work to achieve results.

Connecting Online

Members and stakeholders are increasing the use of social media platforms to exchange information.

ACCCExchange

In 2014-2015 members benefitted from discussions on hundreds of topics in the online forum, ACCCExchange. Discussions have led to the development of sessions at national meetings and articles in Oncology Issues.

Here are the most popular discussions on ACCCExchange since July 2014:

- Community Needs Assessment
- Patient Assistance Funds
- Is there a Making a Wish Foundation for Adults?
- Navigation Quality Measures
- Crosswalk for Radiation CPT Codes 2014 to 2015
- CTR Salary Range
- LDCT – Once is Not Enough
- Patient Snacks in Infusion
- Nursing Ratio for Infusion Center
- OP Pharmacy Staffing/Hood Benchmarks

Other stats:
- Current members in ACCCExchange: 21,759
- From July 1, 2014-Present: 631 new threads, 2,140 public messages, and 980 unique contributors
In 2014-2015, ACCC has developed an expanded portfolio of national and regional meetings to ensure that members have access to need-to-know information and peer-to-peer discussion. Financial Advocacy Network Regional Meetings and Oncology Reimbursement Meetings have attracted hundreds of providers who benefit from these free member meetings on topics of critical importance in cancer care. In spring 2015, ACCC will also convene regional meetings for the Oncology Pharmacy Education Network.

The National Oncology Conference was held in San Diego, California, October 8-10, 2014. Conference attendees took advantage of sessions in two tracks: “Your Program” and “Your Patients.” Hundreds of attendees benefited from sessions that delivered practical knowledge, insight, tools, and resources leading to one destination: the delivery of quality cancer care.

ACCC’s 41st Annual Meeting, CANCERSCAPE, held March 16-18, 2015 in Arlington, Virginia, focused on high level, strategic planning sessions and public policy insight. For ACCC’s Capitol Hill Day, March 16, attendees addressed issues of importance to oncology with national legislators.
A Focus on Quality and Value

With healthcare reform bringing transformative change to the nation’s healthcare system, ACCC is playing a pivotal role in helping members to stay ahead of the change curve and to speak up for quality care. Central to the changes underway in healthcare payment and delivery is a focus on quality and value. In national meetings, members-only conference calls, advocacy initiatives, and through ACCC’s Institute for the Future of Oncology, the Association works to support members in the delivery of quality cancer care to patients in their home communities.

Institute for the Future of Oncology

ACCC’s second annual Institute for the Future of Oncology forum brought together thought-leaders in oncology to discuss two topics: how quality in oncology is communicated to key stakeholder groups and the role of oncology leadership in the evolving healthcare landscape. The June 2014 forum discussion led to white papers on “Communicating Quality in Oncology” and “Oncology Leadership: Looking to the Future in a Shifting Healthcare Environment.”

Dynamic Annual Meeting

ACCC’s 41st Annual Meeting, CANCERSCAPE, focused on providing leading-edge information and insight so that cancer programs can adapt and benefit from the transformative changes occurring in the cancer care landscape. Sessions were focused around three key areas: Policy, Value, and Quality. Among the topics discussed were CMMI’s Oncology Care Model, perspectives on the ACA five years in, the role of big data in the delivery of quality care, how to put quality initiatives to work to benefit patients and the cancer program, multidisciplinary views on value-based cancer care, and strategies for coping with the impact of financial toxicity.

Benchmarking Trends in Cancer Programs

ACCC’s 2014 “Trends in Cancer Programs” survey provided data on Quality, Patient-Centered Care, and Community Needs and Outreach Efforts at ACCC member cancer programs.

ACCC’s Advocacy on Capitol Hill

• On March 16, 2015, ACCC’s Capitol Hill Day provided an opportunity for members to meet face-to-face with their legislators on Capitol Hill. ACCC continues to work with Congress and related stakeholder groups to replace the flawed sustainable growth rate (SGR) formula with a policy that will create stable payments and reward quality care. ACCC also continues to advocate for oral parity on both the state and national level, and to eliminate the prompt pay discount from Medicare reimbursement.

ACCC’s Advocacy to CMS

• In 2014 ACCC submitted comments to the Centers for Medicare & Medicaid Services (CMS) on the proposed 2015 Physician Fee Schedule and Hospital Outpatient Prospective Payment Systems rules. CMS agreed with ACCC’s comments and did not implement a proposal to delete the radiation treatment vault as a direct practice expense (PE) input, which would have resulted in significant cuts for radiation oncology.

• During the year, ACCC responded to requests for information and submitted comments on potential changes to the 340B Drug Discount Program, USP’s proposed Chapter 800, the Medicare Shared Savings Program (MSSP) and ACO proposed rule, Medicare’s proposed NCD for LDCT for lung cancer screening, and the 90-Day rule.
ACCC’s “How-To” Approach

As the leading education and advocacy organization for the multidisciplinary cancer care team, ACCC focuses on a “how-to” approach when delivering information and resources to its membership. Below are just a few examples of how ACCC put its “how-to” delivery model to work for members in 2014-2015.

2014 ACCC Innovator Awards

ACCC’s 2014 Innovator Award recipients shared their successful strategies and practical tools at the National Oncology Conference in San Diego. 2014 Innovator Awards were presented to:

- New Mexico Oncology Hematology Consultants, Ltd.
- COME HOME—A Model Oncology Medical Home
- Duke Oncology Network, Duke Cancer Institute
- Capturing Quality Data to Improve Palliative Care
- Anne Arundel Medical Center, DeCesaris Cancer Institute
- A Value-Driven Symptom Management Clinic
- Beaumont Health System, Beaumont Cancer Institute
- Closing the Gap: An Outpatient Nutrition Clinic
- University Medical Center of Princeton at Plainsboro
- From Distress Screening to Solutions: Patient-Centered Support
- Oncology Specialists, SC
- An EMR-Driven Approach to Survivorship Care Plans

Summaries of all the 2014 Innovator Award winning programs, including short videos, are available online at www.accc-cancer.org/innovator. Members can gain a more in-depth view of these replicable solutions through innovator award winners’ articles published in Oncology Issues.

Provider Education Projects

ACCC’s “how-to” approach is a common thread in the development and delivery of member-driven education programs.

For example, to meet growing demand and to differentiate themselves from their competitors, many cancer programs are looking at the possibility of extending practice hours. ACCC offers the “how-to” perspective with its “Patient-Centered Scheduling: Costs & Benefits of Extending Practice Hours” brochure.

In 2014-2015, ACCC shared results from its Molecular Testing in the Community Setting—Learning Labs for Process Improvement project. Eight ACCC Cancer Program member institutions participated in learning labs focused on improving molecular testing at the system level. Key areas for improvement were identified along with potential action items for each. Results were shared in a cover story for Oncology Issues and can be accessed online at: www.accc-cancer.org/moleculartesting.

ACCC’s education initiatives on less common cancers, including pancreatic, gastric/GE junction, and myelofibrosis, are designed to identify effective practices for improving care and to provide “how-to” resources, including:

- One-page infographic summarizing projects’ needs assessment results.
- Information gleaned from the projects’ Community Resource Centers revealing “how” ACCC member cancer programs improve care to these patient populations, including programmatic elements that can strengthen disease-specific programs—published in stand-alone supplements.
- “Ask the CRC” columns in Oncology Issues featuring patient case studies and concrete strategies on “how” community programs can effectively partner with larger tertiary or academic programs to care for patients with these less common cancers.
- Dedicated webpages with resources, videos, and more.
Honoring Achievements

The David King Community Clinical Scientist Award recognizes individuals who have demonstrated leadership in the development, participation, and evaluation of clinical studies and/or are active in the development of new screening, risk assessment, treatment, or supportive care programs for patients. In 2015, two physicians were honored with this award.

Stuart L. Goldberg, MD, Chief, Division of Leukemia at the John Theurer Cancer Center of Hackensack University Medical Center in Hackensack, New Jersey is a recipient of the 2015 David King Community Clinical Scientist Award. He is an Associate Clinical Professor at the University of Medicine and Dentistry of New Jersey. Dr. Goldberg oversees John Theurer Cancer Center’s myelodysplastic syndromes (MDS) program. His research efforts include redefining the incidence and epidemiology of MDS based on analysis of Medicare databases, and he was the lead investigator on a food interaction safety study for chelation therapy in transfusional iron overload.

Eric Lee Raefsky, MD, received the 2015 David King Community Clinical Scientist Award posthumously. Dr. Raefsky was a physician at Tennessee Oncology, PLLC, for 25 years, serving on the Board of Directors and as Medical Director. He established a full-time clinic at Summit Medical Center and served as a charter staff member, Chairman of the Department of Medicine, Oncology Committee Chairman, and on multiple committees. As an advocate for clinical trials research through the Sarah Cannon Research Institute, Dr. Raefsky enrolled 40-50 patients in clinical trials annually, totaling 1,000 during his career.

ACCC’s Clinical Research Award is bestowed upon an individual or individuals whose research has significantly and positively impacted the oncology patient, family, and/or community.

Nicholas J. Petrelli, MD, FACS, was recognized as the 2014 ACCC Clinical Research Award recipient. A nationally recognized expert on colorectal cancer, Dr. Petrelli is the Bank of America endowed medical director of Christiana Care’s Helen F. Graham Cancer Center & Research Institute in Newark, Delaware, where he has led the development of a state-of-the-art clinical oncology care program. Most recently, the Helen F. Graham Cancer Center & Research Institute received a five-year, $8.2 million grant from NCI’s Community Oncology Research Program (NCORP) to bring leading-edge cancer screenings, prevention, control, treatment, and imaging research trials to more people closest to where they live.

Financial Advocacy Network

In 2014-2015, ACCC elevated this popular resource to the next level by revamping and expanding both its online presence and regional meeting offerings. ACCC members have access to a robust collection of tools and resources to learn how to most effectively deliver financial advocacy services, such as:

- “How-to” videos on essential topics, including justifying the financial advocacy staff, skills needed for financial advocacy, and more.
- An interactive online forum where members can ask (or answer) questions related to financial advocacy.
- Job descriptions, staffing models, and flowcharts to help streamline financial advocacy services.
- Financial tracking and reporting tools.

While these online resources enable ACCC members to learn on their own time and at their own pace, ACCC’s free Financial Advocacy Network Regional Meetings offer the invaluable opportunity for financial advocates to network face-to-face with experts and others in the field. In 2014 close to 400 attendees benefitted from these meetings. In spring 2015, additional regional meetings will be held in Tampa, FL, Silver Spring, MD, and Burlingame, CA.

2015 Patient Assistance and Reimbursement Guide

Now in its fifth year, ACCC’s Patient Assistance and Reimbursement Guide is the premier “how-to” resource for delivering comprehensive patient assistance services. In addition to eligibility criteria and enrollment instructions for pharmaceutical and non-pharmaceutical patient assistance programs, the online version links directly to enrollment forms.

So, while ACCC cancer program members already know what to do—develop and implement comprehensive patient-centered services—ACCC helps with the how.

Patient Assistance and Reimbursement Guide
Online Engagement

Landing Page Hits
4,224 - 2013
9,281 - 2014
+120%

Page Views
99,036 - 2013
169,249 - 2014
+170%

Unique Users
3,016 - 2013
4,749 - 2014
+57%

Financial Advocacy Network

Resources & Tools for the Multidisciplinary Team

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169,249 - 2014
+170%

Unique Users
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4,749 - 2014
+57%
ACCC’s Three-to-Five Year Goals

Goal A: Members will recognize the value of ACCC and utilize its resources for knowledge exchange, education, and networking.

Goal B: ACCC will expand its influence and advocacy for quality cancer care.

Goal C: ACCC will manage its resources to meet its financial objectives.

Goal D: ACCC will establish meaningful collaborations & partnerships.

Goal E: ACCC will examine its leadership and membership structure.

ACCC’s strategic objectives guide us, as we strive to be recognized as the leading education and advocacy organization for the multidisciplinary team. Here are some resources and initiatives from ACCC coming in the months ahead, as we continue to enhance member value.

Distress Screening

Commission on Cancer (CoC) Standard 3.2 Psychosocial Distress Screening is now in effect. ACCC and the American Psychosocial Oncology Society (APOS) are working together to help network successful distress screening programs with those programs struggling with distress screening implementation. Look for a white paper to be released this summer.

Oral Therapies: A Patient-Centered Approach

A mobile application for the multidisciplinary team is being developed to assist providers in the assessment of potential oral regimen candidates and to educate patients who are beginning an oral regimen.

Transplant Treatment Path: Optimizing Patient-Centered Care for ASCT in Multiple Myeloma

Multiple myeloma patients who are transplant-eligible often must travel from their home communities for ASCT. This new project aims to develop tools to support communication and care coordination of multiple myeloma patients pre- and post-ASCT. Learn more at www.accc-cancer.org/multiplemyeloma.

Molecular Testing

Building on recent ACCC initiatives to identify barriers and effective practices in molecular testing programs, ACCC is working with a group of stakeholders to provide peer-to-peer learning opportunities for molecular testing in lung cancer. A series of webinars will be launched in spring 2015.

ACCC recently established the Institute for Clinical Immuno-Oncology (ICLIO) to accelerate the advancement of the science and clinical application of immuno-oncology with an emphasis on the community setting. ICLIO will focus on the treatment, delivery, policy, and management of operations.

ICLIO will focus on five areas to equip the multidisciplinary cancer care team with a dynamic understanding of immuno-oncology therapies:

• Clinical: Optimization & Understanding
• Coverage & Reimbursement
• Best Practices: Management & Operations
• Patient Access & Advocacy
• Education, Training, & Information Products

ACCC will host the ICLIO National Education Conference, October 2, 2015, in Philadelphia. More information is available at www.accc-cancer.org/ICLIO.

Oncology Issues

In the coming months, members can look forward to feature stories in Oncology Issues on:

• Closing the Gap: An Outpatient Nutrition Clinic (2014 ACCC Innovator Award Winner)
• Capturing Quality Data to Improve Palliative Care (2014 ACCC Innovator Award Winner)
• Cancer Prehabilitation: A Growing Field
• An Innovative Patient Companion Program
• Developing & Implementing a Patient Advisory Council
• A Behavioral Oncology Program to Support Medically Complex Patients
• Recent Developments in Genomic Testing for Breast Cancer
• Implementing a Personalized Medicine Program
The statement of Financial Position shows an increase in net assets from $3,201,165 to $3,581,894 for fiscal year 2013-2014. The increase is largely due to funding for new educational programming. The Statement of Activities and Change in Net Assets shows total unrestricted net assets at year end of $931,719, up from $809,766 at the beginning of the year. The cash reserve account increased from $480,371 to $533,540. Financial statements for the fiscal year ended June 30, 2014, are provided.

Amendments to the budget for the purpose of conducting special projects in conjunction with the Corporate Development Committee have been approved for fiscal year 2015. The Finance Committee approved budget amendments for up to $5,760,000 of revenue with associated direct project costs of $5,472,000. Funding commitments as of December 31, 2014, for the 2015 fiscal year total more than $5,500,000 with associated project costs estimated at $5,225,000.

Statement of Financial Position as of June 30, 2014

<table>
<thead>
<tr>
<th>ASSETS</th>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash</td>
<td>$ 3,034,832</td>
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<tr>
<td>Investments</td>
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<td>Accounts Receivable</td>
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<tr>
<td>Sponsorship Receivable</td>
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<tr>
<td>Prepaid Expenses</td>
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<tr>
<td><strong>Total Assets</strong></td>
<td><strong>$4,577,780</strong></td>
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<table>
<thead>
<tr>
<th>LIABILITIES AND NET ASSETS</th>
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</thead>
<tbody>
<tr>
<td>Accounts Payable &amp; Accrued Liabilities</td>
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<td>Deferred Revenue</td>
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<tr>
<td>Membership Dues</td>
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<td>Other</td>
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<td><strong>Total Current Liabilities</strong></td>
<td><strong>$995,866</strong></td>
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<table>
<thead>
<tr>
<th>Net Assets</th>
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</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>$ 931,719</td>
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<td></td>
</tr>
<tr>
<td>Temporarily Restricted</td>
<td>2,650,175</td>
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<tr>
<td><strong>Total Net Assets</strong></td>
<td><strong>$3,581,894</strong></td>
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</table>

| **Total Liabilities and Net Assets**                | **$4,577,780** |          |          |

Statement of Activities and Change in Net Assets for the Year Ended June 30, 2014

<table>
<thead>
<tr>
<th>Revenue</th>
<th>Unrestricted</th>
<th>Temporarily Restricted</th>
<th>Total</th>
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<tbody>
<tr>
<td>Membership Dues</td>
<td>$ 875,034</td>
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<tr>
<td>Conferences and Meetings</td>
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<td>Journal</td>
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<td>Interest</td>
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<td>Other</td>
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<tr>
<td>Pharmaceutical</td>
<td>5,025</td>
<td>5,218,570</td>
<td>5,223,595</td>
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<tr>
<td>Reimbursement Project</td>
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<td></td>
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<tr>
<td>Net Assets Released from Donor Restrictions</td>
<td>5,623,994</td>
<td>(5,623,994)</td>
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</table>

| **Total Revenue**                                    | **$7,326,401** | **$258,776** | **$7,585,177** |

<table>
<thead>
<tr>
<th>Expenses</th>
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<th></th>
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<tbody>
<tr>
<td>General</td>
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<td>-</td>
<td>$ 809,445</td>
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<tr>
<td>Conferences and Meetings</td>
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<td>-</td>
<td>891,159</td>
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<tr>
<td>Journal</td>
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<tr>
<td>Membership</td>
<td>242,285</td>
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<tr>
<td>Other</td>
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<td>85,473</td>
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<tr>
<td>Pharmaceutical</td>
<td>4,753,568</td>
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<td>4,753,568</td>
</tr>
<tr>
<td>Reimbursement Project</td>
<td></td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

| **Total Expenses**                                   | **$7,204,446** | - | **$7,204,446** |

<table>
<thead>
<tr>
<th>Change in Net Assets</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Net Assets, Beginning of Year</strong></td>
<td>$ 809,766</td>
<td>$ 2,391,399</td>
<td>$ 3,201,165</td>
</tr>
</tbody>
</table>

| Net Assets, End of Year                             | **$931,719** | **$2,650,175** | **$3,581,894** |

Treasurer's Report

Jennie R. Crews, MD, FACP, Treasurer
2014-2015 Board of Trustees

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Becky L. DeKay, MBA

President-Elect
Steven L. D'Amato, BSPharm, BCOP

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W. Charles Penley, MD

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Randall A. Oyer, MD
Laeton J. Pang, MD, MPH
Mark S. Soberman, MD, MBA, FACS
Kim Woother, RN, OCN

2014-2015 Committee Members

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