Taking Control of Cancer-Related Costs:

Practical Financial Tips

National Webinar Transcript

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Presented by:

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Symone Sass: All right. Welcome everyone. Thank you so much for joining us for today's webinar on financial tips. I'm Symone Sass and I'm a Sharsheret support program manager. Thank you for joining us this evening for this very important webinar, Taking Control of Cancer-Related Costs: Practical Financial Tips. I want to take a moment to thank our sponsors who have made today's program possible. Thank you to Lilly, Merck, Novartis Oncology, the Cooperative Agreement 240061 from the Center for Disease Control and Prevention. We also want to thank our Embrace breakout sponsors, Lilly and Pfizer. Our Embrace Breakout Session exclusively for members of Sharsheret's Embrace community facing metastatic breast or advanced ovarian cancer will take place immediately following the webinar.

So let's start first of all with a few housekeeping items. Today's webinar is being recorded and will be posted on Sharsheret's website along with a transcript. Participant faces and names will not be in the recording. If you would like to remain private, please follow the instructions in the chat box. That should be in there now. We have closed captioning available and those instructions are in the chat as well. You may have noticed that you were muted upon entering the Zoom. Please stay muted during the webinar. If you have any questions during the presentation, please type them in the chat box. We will have a Q&A after the presenters finish and we will try to get to as many questions as we can. I want to remind you that Sharsheret is a not-for-profit cancer support and education organization and does not provide any medical advice or perform any medical procedures. Our full medical disclaimer is in the chat. Today we're going to hear from Patricia who is going to share her personal story with us. Welcome, Patricia. Thank you so much.

Patricia: Hello, everyone. Hi, I am Patricia. I am a 51-year-old female, so thank you for having me. I did want to start with giving you a brief little history of where I am on my cancer journey. So on the evening of February 7th, 2026, a large painful lump appeared on my right breast. By the 16th of February, I received a call saying that I have cancer. After several MRIs, a full body PET scan and additional ultrasounds, my formal diagnosis was triple-negative grade 3, stage 2 breast cancer. Many things ran through my mind, first of which was how am I going to afford not going to work? I am the sole provider for my family. I brought my 83-year-old mother from Texas to live with me about less than a year ago of which I do provide routine care for her. I also have a 17-year-old son who needs support as he's working and finishing his last year of high school. I do have three other children who are independently supported, but being a present parent is still my utmost priority with them.

So at that point when I found out what my diagnosis was, I had no idea what my course of treatment demanded, how much time off I was going to need and what kind of expenses or costs I would be facing. But at that point, there was no way that I could stop to sort it all out. I had to move

forward with what my doctors recommended. So on March 12th, less than a month from my diagnosis, I began chemo and immunotherapy. I have been receiving infusions every 21 days. I was able to work through my first five cycles. The second half of my treatment has introduced a little bit more of stronger chemo medicines and I have found myself to be a little bit more physically challenged. I'm a lot more achy, irritable, much more depressed this time.

So I have finally allowed myself to take a break from work and have requested FMLA leave from my employer. This decision did come with the understanding that my pay would be reduced until I return. So early on, Sharp provided me a patient navigator. His name is Jonathan Ferguson and he helped minimize a lot of the financial stress that comes around during this time. He has helped me provide the tools to communicate with my employer with all the medical needs that my diagnosis involves. He negotiated accumulating medical responsibilities that a lot of my appointments and infusions do add. And he also referred me to a variety of organizations, some of which were Susan G. Komen, the Pink Fund, Breast Cancer Angels, and Sharsheret. My children have also participated in organizing a GoFundMe and have been working together to host a fundraiser event in July for me to compensate for the loss of pay that I'm going to be experiencing these next few weeks.

So I do want to say that I am very honored to be here to share my story. Reason being is although asking for help is a very difficult thing for me to do when so many other cancer patients face more overwhelming obstacles, Sharsheret has truly been a blessing. After working with Jonathan, Symone, and Stephanie, I was awarded a grant of $2,000 to help with my rent and I could express at that time, and I still can't, how much relief that assistance has provided. The application process was very easy. I knew within a few days of applying if I was eligible and just knowing that an organization like Sharsheret and its supporters would help a stranger has been very, very ... An emotional realization for me.

So I wanted to speak today to acknowledge that those who have spent countless hours in creating resources for patients who may not know how to take the first step in asking for help after being diagnosed like I did, I do want to say that help is out there. So I am grateful for these wonderful organizations for my support system that I have at home and I do plan on continuing to look for various resources that I have been provided with. And that's my story. Thank you so much.

Symone Sass: Thank you so much, Patricia. We really appreciate you sharing your story with us today. And when you said that it was hard for you to take that step to ask for help, I mean, I hear that so much from the women that I speak to. And it is a difficult thing to do for a lot of people, but it's so important to get that help. And it's wonderful that you had a navigator at your hospital at Sharp Hospital who was so accessible and so helpful and was able to direct you to our organization and others that helped you. So thank you.

Patricia: Yeah, I agree.

Symone Sass: Okay. I do want to emphasize again that Sharsheret is here to help with financial piece of this, not only with our internal programs, but also with resources of other programs that we can direct you to. I want to highlight a couple of our offerings, which Patricia did touch on. First, we have our Best Face Forward 2.0 program, which provides services and subsidies for eligible individuals for nonmedical services that are critical to quality of life and body image and that are only partly covered by insurance companies, if at all. Best Face Forward 2.0 services include financial subsidies for wigs, cold caps, and nipple areola and eyebrow tattooing. And the link was just put into the chat of the page on our website that has information on that program. Of course, all financial subsidies are subject to quarterly availability.

Additionally, for assistance with urgent financial needs, Sharsheret partners with The Change Reaction to provide emergency financial grants to people who are diagnosed with any stage of breast or ovarian cancer and live in California or who are diagnosed with stage four breast or ovarian cancer and live anywhere in the U.S. and that link is now in the chat as well.

Also, there should be another link that's going to be put in the chat that has additional financial resources that can be found on our website.

Now I'm excited to introduce our speakers for tonight. First, we will hear from Dane Bouck and Devin Traxler Burkhart. Dane is the Director of Programs and Quality Assurance at Family Reach, where he leads financial assistance initiatives to help to remove the financial barriers facing cancer patients. With over 10 years of nonprofit work, Dane has worked in all levels of operation, serving people in need, past experiences such as direct service provision, supporting mental health services and compliance initiatives within childcare subsidy, as well as disability services led to Dane's passion for building and leading sustainable people centered programs. Dane is rooted in crafting and maintaining equitable quality and reliable financial assistance programming to ensure cancer care is accessible to all.

Devin is the Senior Manager of Resource Navigation at Family Reach, a social worker who started her tenure working directly with patients. She transitioned her frontline expertise into program development, architecting Family Reach's resources. Devin is dedicated to empowering her team to provide holistic care and ensuring patients don't need to navigate cancer without a roadmap. Practicing the self-care she encourages for her team, Devin can probably be found playing video games or crocheting with a dog in her lap.

After Dane and Devin present, we will hear from Rebecca Rosansky who serves as the partnership officer for the Jewish Free Loan Association, which is a Los Angeles-based nonprofit. Since 1904, they have provided

thousands of zero interest, zero-free loans for people of all faiths and backgrounds for a wide range of needs. In her role, Rebecca does community outreach by building partnerships with a variety of nonprofits, government agencies and institutions. We are excited to welcome all of you today. As a reminder, if you have any questions, please put them in the chat or privately message me and we will get to as many as we can during the Q&A following both presentations. I'm happy to welcome Dane and Devin to the screen now. Welcome.

Dane Bouck: Thank you for the introduction, Symone, and thanks to Sharsheret for having us join in on this important webinar on taking control of cancer-related costs. Again, my name is Dane and I lead our financial assistance initiatives and I will be joined by Devin who leads our resource navigation services and we are Family Reach. So jumping right in, Family Reach is a national nonprofit focused solely on helping people meet their basic needs during their cancer treatment. So when we say basic needs, we are referring to food, housing, transportation, and utilities. So first to level set and highlight the reason we are all likely on this call today, according to American Cancer Society's 2026 facts and figures, there will be 2.1 million new cancer cases in 2026 alone with an estimated annual economic burden of $21.1 billion between out of-pocket, time and travel related costs to patients. When considering all of the other expenses that may be impacted by or the financial choices a patient may need to make to prioritize these costs, this may not even meet the full scope of cancer-related costs many patients are facing.

Devin Traxler Burkhart: These numbers show that this problem is immense and what we really want to make sure that everyone takes away from this time together is that you are not alone in this. When we look at this 21.1 million people and 21.1 and more billion dollars, these are big numbers. And unfortunately, when it comes to cancer, financial hardship is the norm. Up to 70% of people have unmet social needs, including financial burden, social support, psychosocial needs, and ability to access transportation. 69% of female patients report financial struggles or being financially stressed while going through cancer treatment, 42% of patients spend their life savings within two years, and 1 in 4 oncology visits include financial concerns. And I don't say all this to fixate on the depressing situation. Just to emphasize that this is unfortunately a typical cancer patient experience in America and there's these impossible choices that lead to delayed care, skipped meds, missed appointments, and bankruptcy.

Dane Bouck: Yeah. So these numbers from Devin speak for themselves, but it is not just the statistics or stats on a page. These are the same things that we here at Family Reach are hearing from our patients on the ground. And I really wanted to take a moment to share a conversation that one of our patient support coordinators had with a patient's wife named Susie. Both of these names have been changed for privacy.

"When I was chatting with Harold's wife, Susie, she mentioned that she was still a little hesitant to ask for help, even though Harold had been receiving treatments for the last 10 years. Their daily travel for radiation and the fact that Harold could potentially be off work for three more months was starting to weigh on them. Susie said this is the first time they've asked for help and wasn't sure if they should even utilize our full grant amount. I was able to remind her that this grant amount was a drop in the bucket compared to the deductibles and max out-of-pocket amounts that they've met over the last 10 years of treatment. Susie was agreeable that a little help can go a long way."

So this is a powerful conversation that was had here. 10 years is a long time to face these burdens without feeling comfortable to ask for support and it really sets the stage for the thread that we would like to weave into our presentation today and that is normalizing having these conversations early and often to find support as needs evolve, whether with your healthcare team, support organizations, or even the individuals or companies that you may interact with financially.

So specifically, how is Family Reach targeting these burdens? We offer our Financial Resource Center, an integrated stop for patients who need help meeting their basic needs during their treatment and as it's the internet, of course, this includes self-service offerings that are available 24/7 because every minute really does count when being behind on bills and facing cancer. Through our Financial Resource Center, patients can quickly access resources that focus on affording food, housing, utilities, and transportation. It can connect them to emergency support for immediate relief and provide ongoing assistance during treatment through our different services, which we'll touch on those services and we'll also highlight some of our tips and findings based on our work with patients. Most of all though, as I just outlined in the previous slides, our resource center really aims to normalize these financial conversations during cancer care as treatment costs are not the only burden patients are facing. Many people are feeling the same effects you may be feeling of supporting themselves or their families during treatment.

So digging a little deeper, our resource center provides cancer patients with three integrated pillars of support. Financial assistance for immediate basic need insecurities, resource navigation that connects patients to long-term support and patient education available in English and Spanish that normalizes these conversations and builds awareness early. Together, these pillars really allow us to walk alongside patients across the full arc of a cancer journey with support that adapts as needs evolve.

So really quickly here, I just wanted to pause on some numbers we saw at Family Reach in 2025 and really primarily just to highlight that many people are seeking support in various ways and stages of their journey, whether that be taking time out of an already busy treatment schedule, searching for resources on their own, seeking more targeted one-to-one support and navigation, and/or looking to their healthcare team for

support and finding financial assistance that may be available for their situation.

Devin Traxler Burkhart: Our goal with these different services, thanks for your patience while I unmuted, is to make folks feel more confident in their awareness of financial resources and to reduce financial distress. So we see 86% of patients and caregivers who work with us do see awareness of financial resources increase and 91% reported decrease in their financial distress.

The first thing I would like to highlight that Dane went into when we think about our pillars is our financial tip sheets. So these are educational materials, like you said, available in English and Spanish, and these are available on our website for anybody who may find them helpful. These downloadable resources help folks talk about their finances with healthcare teams, manage their household bills, and save money on everyday expenses like utilities and groceries. We hear that these tip sheets are especially helpful for starting difficult conversations. Darcy said, "I think Family Reach's conversation guide Asking for Financial Help During Cancer Treatment," which we have since turned into a set of more robust tip sheets that cover a variety of topics, "Should be available in every cancer treatment center across America. Having the knowledge and awareness to address financial concerns gives the cancer patient the power to start the conversation. It opens many doors for you during one of the most challenging times of your life."

Our first tip sheet that I want to highlight is our interactive expense sheet. So many budgeting tools online don't account for the specific financial needs that cancer patients have. Our expense sheet starts with things like insurance and costs and copays, and then include some line items that you may or may not have thought about along with plenty of empty space to list your own personal household expenses. You can even brainstorm here and pull those numbers into another app or tool that you're already using. You can print it out or have someone at the hospital print it out for you if you don't have access to a printer. A tool like this can be a good starting point in developing a realistic budget. Let's say you're surviving solely on Social Security income, on that very fixed amount, budgeting is helpful, but it can also be a good thought starter to share with your care team about what costs are particularly stressful.

So if you see that your line item for nutritional supplements is really high, your social worker can then connect you with specific resources at the hospital that might be able to cover or reduce that cost for you to put that fixed income towards something else as an example. This is just a kind of snippet of this sheet. The full sheet is much longer and we'll send a link to all of our educational resources in the chat.

The second tip sheet I'm highlighting is asking your care team for help with everyday costs during cancer treatment. So your care team at the hospital or cancer center are going to be an integral part of your journey, not just regarding treatment, but also when it comes to your finances as

they relate to treatment, whether that's cost of care or the stressors that come from losing an income for a portion of time or for an extended period of time. At Family Reach, we focus on basic nonmedical needs, but there are a lot of supports at the hospital focused on treatment costs and your care team will be able to point you towards the experts like Patricia kind of mentioned earlier. I would recommend checking out the resources from our friends at Triage Cancer if your concerns are specifically about insurance and medical expenses, they have a host of incredible resources.

In terms of basic needs, this tip sheet is going to guide you to some questions that you can ask that, again, you may not have thought of or you may have thought of, but not had the words to ask. So for instance, you can ask if there are affordable options for temporary housing near your cancer center if you have to travel for treatment. Or you can say, "Hey, can I schedule my appointments on the same day with these different doctors so that I can save money on gas and parking or time off of work?" So this is a great tip sheet to download and keep handy on your phone or just grab the questions that are applicable to you and put them in your notes app on your phone or even send them in an email to a social worker or patient navigator just saying like, "Hey, at our next time, I'm in for an appointment, I would like to talk about these things." Whatever feels good to you.

The final tip sheet I wanted to highlight in this presentation is how to talk to your landlord and find rent support during treatment, because I know this can be a really particularly challenging conversation. Some patients worry that disclosing their cancer diagnosis will lead to an eviction. Federal and state housing laws prohibit this and protect individuals from discrimination based on a health condition, but you can be evicted for nonpayment even if the reason is because of a health condition. So it is important to have these conversations with your landlord and I know that can feel really uncomfortable and awkward. We do see that about 45% of patients we work with have trouble paying their mortgage. This is a huge bill, especially depending on where you may live. It's completely understandable that this would be a challenging one to pay.

One potential way to start the conversation is just simply kind of putting it out there and saying, "I'm facing a health crisis. I might fall behind on rents. I want to discuss options to avoid eviction," showing them you're proactive, you want to find a solution and being honest about the situation. If you can't reach an agreement or if you do feel like you're being discriminated against, the U.S. Department of Housing and Urban Development or HUD has housing counselors that can help you learn about your rights. On this tip sheet on our website, we do have the website for them and the number to call. I'll also paste that in chat because I do have it handy.

Switching over to resource navigation, the second pillar. We have navigation that connects patients and their caregivers to programs for

housing, food, utilities, and transportation, the basic needs Dane mentioned earlier. Our navigators offer safe and secure places for families to share their financial concerns and access financial support. We also have a self-serve navigation experience on our website that folks can enter their zip code and do some searching on their own, which I am going to do a demo of our whole FRC, including how to use that zip code search a little later on.

Dane Bouck: Thank you, Devin, for highlighting some of these useful tips and our resource navigation. So jumping into financial assistance, this is really our pillar that is for those with immediate need or for those in crisis. Financial assistance seeks to ensure that these basic need barriers we've been talking about are met or reduced for patients. So throughout the year, Family Reach does release different targeted funds on a monthly basis for patients in active cancer treatment via our own funds and partnerships, which I would just like to take a moment and point out that we know active cancer treatment is a very broad term when you're depending on different patients and different cancer diagnoses. So we take many considerations into account such as clinical trial participation, surgery timelines, and et cetera. Healthcare providers at a patient's treatment center can apply on behalf of the patients for this resource. So to help them hopefully receive this much needed financial support, whether via direct payment or vendor payments.

And just pausing for a moment, I did want to highlight that while it is tough to have these conversations or know what to share with healthcare teams, professionals like social workers, especially in our experience, are often highly aware of resources like these, ours and other organizations, and check them regularly on a weekly or daily basis. So it's really important to have those financial conversations often so that they're current on your specific needs and can advocate and hopefully take some of that burden off of your plate.

So really just tying these three pillars together that we've highlighted today, I wanted to talk about seeking out these financial resources on a cancer journey can be ongoing or cyclical. It's not always in a perfect trajectory. As we mentioned earlier, needs can evolve or adapt. So we've seen firsthand such as patients diagnosed with metastatic breast cancer who've been in active treatment for over four years, who maybe year one requested emergency financial support because they're struggling with their rent. Year two, they felt financially stable and didn't reach out. And then year three or four, they told us they felt hesitant because they'd already been supported, but they reached back out anyways and learned we could still give financial and one-to-one support for them. So with this framing, I'm going to pass to Devin for the demo of how this process of accessing resources can look through our website.

Devin Traxler Burkhart: Thanks, Dane. So I am going to pop over to our Financial Resource Center located at familyreach.org/gethelp. Hopefully my screen share has retained what I'm trying to share. The financial resource center is located

at this get help address. Anywhere on our website, you can find get help right there at the top, so hopefully very easy to find. In our Financial Resource Center, we have our four cards for our three services. These top two cards are for our navigation service, whether that's finding local resources on your own, which I'll dip back to in a second, connecting with a navigator, so applying to work with one of my team members, educational resources. So this is that resource library that Dane linked with all of our educational materials and tip sheets, which will be updated as we create more. And then our financial assistance grants where your social worker or healthcare professional can apply for grants as they're open. We have all available funds updated on our website, so if you see something there, you know that it is up-to-date.

You can also dip into these specifics. So if you want a little more guidance on where to start, you can go into any of our four pillars here. So I'm going to click into housing, and this is just a little more specific. We do want to make sure every part of the Financial Resource Center is super easy to find from wherever you are. So we still have the zip code search right here. We still have the button to apply to our navigator here as well and our link to available funds. Just get into a little bit more specific detail around Like frequently asked questions or the specific resources that you can access. And if you get to the bottom and you want to look at one of these other pillars or needs or just head back to the main page, you're absolutely able to do so. Just trying to make it as simple as possible to find what you're looking for.

So with that, I'm going to go back to find local resources and I'm going to click search for resources and start searching. So I'm going to enter my zip code here and this is going to show you right off the bat how many resources are available in your area. Something that I want to highlight before we jump in because 5,000 plus is a lot. These are not all cancer-specific. And I think that's something that for folks perhaps at the hospital or the oncology system, it's very easy to come up with these lists of cancer-specific or we build in this network of cancer-specific resources. But for a lot of folks who have been in this metastatic journey or who have been on treatment for a long time, they may have used those resources or they might not be applicable anymore due to how active treatment is defined. So there is a lot on here that is not cancer specific, which I think is also something really worth exploring and getting more information about.

So I've got all these programs here. I'm going to focus on one thing at a time and I am curious about debt. I've got debt. I would like help with it, understandably. Just got to make sure I'm not a bot. And then we're going to pop in and we are going to see some ... Oops, that was a spoiler for the future. We're going to see some specifics. So right up top here, we actually have a partner with Dollar For. If you've not heard of them, they're wonderful and they focus on hospital debt. So if you have a hospital bill that you cannot afford, they will work with you to identify charity care and programs at the hospital that can help reduce that debt,

which is awesome. They are, like I said, a partner and friend of ours. So we have listed them as a featured program. If you see this on this Family Reach zip code search, that is saying we like them, we approve of them, we trust them. And so they're going to pop up at the top just for a little bit of prioritization for you.

You can also see when something was reviewed so you know if it's up-to-date or not. We know resources open and close very, very quickly in the cancer space. And you can also see there's this little check mark, which just says that Dollar For is actually the one who's monitoring this and making sure. So again, just another level of trust and verification.

Most important thing, honestly for all these places is just this connect button, whether that's contacting them, going to their website, this is huge. You're going to see your main services they provide and the people they serve. So I'm like, "Great, I got my debt list. I'm going to open that in another site. Let's keep looking." So I'm going to look in help pay for food because I don't have a good sense of what food banks might be available in my area. So I can check the map over on the left to show, "Oh, okay, just down the street from me, I've got maybe Catholic charities." So I can get a sense of if I don't have a car or if I don't want to spend money on gas, what is actually close to me? What's in my local area?

Additionally, you can search for some filters. So I am going to check and see what are breast cancer-specific resources for food and that's going to limit this search just to a few that are specifically breast cancer organizations that support food. So if you want to get into that very granular piece and focus there, I think that can be very helpful too.

There are additional filters depending on what is best for you, what you need. So program filters will say if you want to call them, if you want to go in person, you want to email them, are they open on the weekends because that's the only time you can get off work? Do you speak a language other than English and can they support you in that language as well? And then there's an income eligibility check as well. So a lot of these organizations will be focused on folks who are at certain percentages of the federal poverty level. So I'm going to type in an estimate of how many people are in my household and what that household makes per month and I'm going to search from there and it's going to do its thing. And then it'll identify programs that you might be eligible for. You're of course going to want to check connect with them, but just looking at my income in this example, I may be eligible for WIC. And again, I can see how close that is.

So there's a lot of different, I think, functionality here, which I really appreciate because I want it to be as helpful or as broad as is possible. So this is available on our website, like Dane said, it's online, so it's always available. If you don't want to be doom scrolling at 3:00 AM and you want to be searching for resources, there are definitely people doing that. So definitely recommend.

I'm then going to jump back to our slideshow. I'm not sure if it's showing a good amount of the screen, but that's okay. I just want to end my portion here with this quote from Aracely. So we asked patients, "What would you tell people? What other advice would you give to other patients?" And what she said was, "I tell them that they need not to be ashamed to ask for the help or feel like they are begging or that they are ashamed of not being able to make it on their own. I felt that way for sure, but I'm so glad I asked because at the moment with all the help I got, I'm okay financially and now I only need to take care of me and my kids. I got a huge weight lifted off my shoulders." So I appreciate Aracely for saying that.

Dane Bouck: Awesome. Thank you, Devin, for the wonderful demo and the powerful quote to tie everything together from our presentation today. We really appreciate everyone for taking the time to listen to our presentation and big thanks to everyone at Sharsheret for inviting us to participate in this webinar. Definitely please don't ever hesitate to reach out if you have any questions on our initiatives or any means of support, even if it's not from Family Reach. Family Reach's contact information is available at familyreach.org and we are available via phone and email. We also have multiple social channels at Family Reach if you're into that and would like to kep up with our work. And again, just thank you everyone.

Symone Sass: Thank you so much, Dane and Devin for your informative presentation. I'm so, so happy to know about this resource because as I think Jessica had mentioned before, we didn't know about it before and it just looks like there's so much available through your organization. And one of the things that I really liked was that you can put in your financial level and then it will tell you certain specific organizations that could help you because I know that's one of the challenges is looking at each organization and seeing what their specific criteria are. And so that looks like a really helpful feature. So thank you again so much. Next, we're going to hear from Rebecca Rosansky from the Jewish Free Loan Association of Los Angeles. Welcome, Rebecca.

Rebecca Rosansky: Thank you so much, Symone. So before I start, I just want to give a little disclaimer that the information that I'm presenting tonight is specific to our local Jewish Free Loan Association in Los Angeles, but it's meant to give an example of some of the resources that are out there and how to access them. It's also going to give hopefully a sense of how some of the similar programs around the country might work. We have many similar sister organizations, Jewish Free Loan organizations around the country and even around the world. Each of them are regional and a list will be sent out to all of you after the webinar is over. And I want to note that while they offer similar resources, their eligibility requirements may differ, and I encourage you to use that list to find your local Jewish Free Loan organization and you can click on each one and find out how they might be able to serve you.

So as Symone mentioned, I'm with the Jewish Free Loan Association in Los Angeles. I am a partnership officer. So a little bit of background. We

were established in 1904. The concept of what we do is really quite ancient, even biblical and many of these affiliate organizations have been around for a long time as well. We're all not-for-profit and JFLA in Los Angeles, we serve people of all faiths and backgrounds. We serve Los Angeles, Ventura, Santa Barbara, and we just started serving Orange County as of a few weeks ago. We have over $20 million in loans currently in circulation and that's spread out amongst about 3,000 people. And we're really proud that we have built a system that works. We have a 99% repayment rate and we charge 0 interest and 0 fees, never. Our loans are you only repay what you borrow and that's the concept of a free loan.

So what can the funds be used for? It's a really wide range of things and you'll probably find that this is true for a lot of the Jewish Free Loans throughout the country. We're designed to serve people's basic needs. So that first and foremost can be healthcare, all kinds of needs related to healthcare, medical equipment, nursing care, hospitalization, all kinds of medical treatments, things related to housing like a home repair, back rent, moving expenses, utilities as well, water bills, electricity, childcare as well. I know a lot of the people on here are mothers or parents and that is also something that we can assist with the costs related to childcare, whether it be preschool or even education loans for higher ed, transportation as well. We help people buy used cars. Also, I want to mention as a women's organization, we also help with fertility costs, whether it be IVF, egg freezing, surrogacy, we provide loans that assist with that as well and many more things. So we do all kinds of loans for small businesses, for education needs, and a really wide range of personal needs all worth mentioning quickly as I can.

So the way our system works is that we require all of our borrowers to have a guarantor. A guarantor is someone who can co-sign on the loan and in the event that the borrower's unable to repay the loan, someone that we can call on to step in and assist with the repayments. So most of our personal loans go up to $15,000. It depends a little bit on what type of loan you're taking out, but most of them go up to 15 as a maximum. And in order to reach that maximum, you have to have two guarantors co-sign on the loan. And then if you only have one guarantor, you can still access up to 7,500, but all of our loans pretty much across the board require at least one guarantor to co-sign on the loan. And you may find that your local Jewish Free Loan organization has similar requirements. We don't take any collateral. This is the system of accountability that we use. We also don't report out to credit agencies on repayments.

You may be wondering how might you be eligible. Again, [inaudible 00:43:03] equal all faiths and backgrounds, but you must be at least 18 years of age and have a social security number or ITIN. You have to have a California issued ID or driver's license that shows that you live in our service area, which once again is Los Angeles, Ventura, Santa Barbara, and now Orange County. All of our materials are currently in the process of being updated as that one is quite new. You also must provide proof of

steady income so that we can make sure that you are able to repay the loan. We also are looking to have a bank account to deposit the funds and take payments out. Everything we do is fully electronic so we don't accept checks or cash. You also cannot be a current borrower or guarantor on an existing JFLA loan. We always require one loan at a time with JFLA.

However, after the loan is repaid, you can always reapply for a new loan. And if you're married, your spouse must sign onto the loan, not as a co-signer, but as a co-applicant. We consider a married couple like one person, whether it's a borrower or a guarantor. And so we want to make sure to have the spouse co-sign onto any document with us.

So the process, we try and make it as easy and painless as possible. You're going to fill out the application on jfLa.org. We just recently updated our application process, so it's a little bit more seamless than it was. After that, your guarantors will receive a secure link to fill out their information and upload their documents, which is going to be a little bit similar to what we ask our borrowers to upload. And then a loan analyst will reach out to do an interview. Everything is assessed on a case-by-case basis, so they really will take the time to get to know your situation. Have a conversation about what you can expect from us and as a JFLA borrower throughout the life of the loan, which by the way, is typically about three years. And then your application will be presented to our loan committee, which is a group of dedicated volunteers and experts, many of whom have been with us for a long time for final review and approval.

And then lastly, a loan contract will be sent for signature and the funds will be dispersed upfront in full. And then we'll begin monthly repayments about one month later and that will begin with typically, again, a 36-month repayment period or 3-year repayment period.

So this is how to reach us. Our website is jfal.org. I'm Rebecca. You can reach me at Rebecca. That's my first name, R-E-B-E-C-C-A at jfla.org. We're also on Facebook, Instagram, LinkedIn. This QR code will take you to our website. We also have a phone number and a general email address at info@jfla.org. I hope this has been helpful. And for those of you, again, who don't live in the Los Angeles or Southern California area, again, a list will be provided with similar organizations all around the country that have similar resources and I highly encourage you to explore what they have to offer and review their specific eligibility requirements as they may be different from what I'm presenting to you tonight. Thank you.

Symone Sass: Thank you so much, Rebecca. Really interesting and looks like it would be really, really helpful for people. It's wonderful that your organization is able to help so many people facing financial crises. And as Rebecca mentioned, we will be sending out resources not only from JFLA and other Jewish Free Loan associations around the country, but also from Family Reach as well. So we'll be sending those out with the email that you will receive if you registered for the webinar along with the recording

of the webinar. Yes. So let's welcome Dane and Devin back so that we can start our Q&A time. Now I wanted to ask first of all, Rebecca, because a question came in, are there any options for people who may not have a family member who would be a guarantor who could be in that role? What do you advise people who come to JFLA and they may not have a family member who can be a guarantor? What can they do?

Rebecca Rosansky: We encourage people to reach out to friends, anyone who they might know. It is a challenging requirement, but that is our system of accountability that we've relied on since 1904. Having a guarantor, finding someone in your life, you may be surprised. And our loan analysts are really amazing at helping people think through the people in their life that may be able to be of assistance.

Symone Sass: Okay. And then can you repeat one more time, Rebecca, the specific areas that JFLA is serving in Southern California? I know it's Los Angeles County, but I think you also mentioned Orange County. Is there any other specific location?

Rebecca Rosansky: Absolutely, yes. So we serve all residents over the age of 18 in Los Angeles, Ventura, Santa Barbara. And just recently we added Orange County. So not of all of our materials are up-to-date just yet. We're in the process of doing that because it's so new, but I want to highlight that we do now serve Orange County with all of our loans.

Symone Sass: That's great. That's wonderful. And one other question that I have for you, Rebecca, is can people take out loans for medical debt or for credit card debt? Are those things that people can take loans out for?

Rebecca Rosansky: Absolutely. They can take out loans for medical debt. When it comes to credit card debt, it really depends on what the credit card debt is for. So everything is oriented around need. So when we evaluate a application, we are looking at proof of need. So a document, we'll ask for a document that kind of shows what the bills are for. And as long as it falls under the category of a basic need and it's not a luxury item or a legal fee or taxes, one of our few prohibited items, we can assist with that.

Symone Sass: Okay. Thank you. Thank you so much, Rebecca. Okay. So for Devin and Dane, one of the questions that I saw earlier was the funding that is provided through Family Reach directly, what are the specific requirements for those? Does someone have to be in active treatment? Does someone need to be at a specific level of the federal poverty level? Are there any specific criteria that you can share with us?

Dane Bouck: Yeah, thank you. Great question. So generally for every single one of our funds, the criteria would be active treatment, which I'll define here in a minute, 300% or less of the federal poverty level and then residing within the United States or U.S. territories. And then of course for financial assistance specifically, the application would need to be submitted by a

member of the patient's treatment center, somebody on their healthcare team, like a social worker or something like that.

So when we're talking about active treatment, Family Reach for the purposes of providing financial assistance, we define active treatment as including any treatment that is intended to cure, slow the progression or prevent recurrence of an individual's cancer. But we understand that types of treatments that fall under these guidelines may vary based on individual's diagnoses. We also recognize that in many cases there are unique treatment schedules or time leading up to and after active treatment such as a few weeks before a surgery or a few weeks after a surgery, et cetera. So before or after that active treatment "has officially ended or began," during which the patient might be engaging in prep or follow-up work, that really results in impacts to their financial situations that we've discussed. Thus, we, of course, will take this into account when determining eligibility as we do process cases on a case by case basis. We review every single case that comes in, even if it from a glance does not meet our immediate eligibility. So those would be the general ... Oh, sorry, go ahead.

Symone Sass: I'm sorry, Dane. Sorry to interrupt you. I just want to reiterate. So let's say someone has finished chemo, this is just an example. Someone has finished chemo, they're waiting for their surgery, but sometimes there's a long wait. Would that be considered active treatment?

Dane Bouck: Yeah, like I said, I think it would really depend on the patient's situation, if they met all of our other eligibility criteria. And like I said, I think we would take that on a case-by-case basis, how near surgery they are or how far off removed from treatment they have been. And then I would just also say that we do release funds that outside of that main set criteria, which generally follows all of our funding. We release, like I said, targeted funds. So some months we might be releasing adult funds. Another month we might have a pediatric fund, we also do clinical trial funds and things like that. So we try to keep a consistent base of funding available for especially adult and pediatric patients, but then also mixing in those targeted funds based on our partnerships or the funds that Family Reach has.

Symone Sass: Okay, thank you. This question, maybe Devin, you can take it. This is someone who specifically said, "My family is down to only one income and disability." And this is really common. I mean, I hear this a lot from the people that I speak to. One parent may not be able to work because they're going through cancer treatment or they're going through cancer treatment and so maybe they're on disability and then they're living just on the disability and one income. How do you approach that situation? It's such a common one. People have to stay up with their mortgage, their car payment with less money. How do you approach that?

Devin Traxler Burkhart: Such a good question, Symone. Yeah, a story I definitely hear all the time and my team hears all the time and is really challenging because

things just continue to be more expensive. And in a lot of cases, you don't know how long you may need to be on FMLA or on that Social Security. I think, I know we've said it a few times, but talking to the hospital and the care team right away is really important and just saying this is something I'm concerned about because there are, I think, different things that can be managed a little bit differently. So I'm thinking of your mortgage. Maybe your lender isn't going to majorly modify your agreement, but you can call them and say, "This is a concern I have. Can I adjust my payments for the next X amount of time?"

So these little things where it feels really strange and I think awkward and you don't know if it's even possible, absolutely, absolutely try at the hospital saying, "Hey, this particular supplement that I need to be on for my diet is too expensive. What are some options? Or are there copay assistance programs that I can get ahold of, at Dollar For, for example?" And I think there's so much out there that you can access that folks just may not know about because California's a huge state, it's a huge country and there's so many small organizations that we don't know about that doing that research or working with someone at the hospital or someone on my team to help find those options I think is really valuable.

Additionally, identifying where those budget items that can pause or can be put off a little bit if we're looking at medical bills, I know those are very large a lot of times and very scary. And while this isn't my area of expertise, so I always refer to Triage Cancer, of course there are a lot of times where that bill is going to be wrong and that is very frustrating and it is very frustrating that as a patient you have to be the one to say, "This doesn't look right." And so there are folks at the hospital, patient advocates might be a title that you can look for who may be able to navigate some of that stuff as well, which can ideally help you minimize expenses. Sorry, that was a lot.

Symone Sass: No, no, that's really important. I recall actually reading an article about how a lot of people don't know that there are funds, charity funds available at their hospitals and they won't be told about it unless they ask about it. So it's so important as you're saying, Devin, to ask, to reach out, to ask people at the hospital. And that kind of also ties into another question that had come in. At what point should someone ask for help? I mean, they know they might have upcoming costs, maybe it hasn't hit them yet. Should they start early to ask about that or should they wait? And I'm thinking, well, maybe that's obvious answer, but what is your take on that?

Devin Traxler Burkhart: Yeah. From my perspective early, early, early, early. There are a lot more options I think before you start to accumulate debt or concerns. So a lot of utility companies will offer assistance programs, but they will not let you get on it if you're behind which seems very counterintuitive to me, but is the case. So let's say you may not know if you're going to be able to pay that utility payment, maybe you'll be perfectly fine. It'll be no problem. You can still ask right away and say, "Can I get on a payment plan just in

case? Then you have a little extra to move around. So I think that's one example of it is totally okay to say, "I don't know what these costs are going to be and I'm not going to be able to work, so let's figure something out."

Symone Sass: That's great. That's great. Good. That's really good. So we're out of time, unfortunately. As we begin to wrap up, I want to thank Patricia first of all for sharing her story and Dane and Devin for sharing about Family Reach and Rebecca for sharing about JFLA with us. We're truly grateful for your being here with us today and sharing about these incredible resources and for being such wonderful partners in preparing this webinar. Thank you so much.

I also want to take a moment to thank our sponsors again. Thank you to Lilly, Merck, Novartis Oncology, the Cooperative Agreement 240061 from the CDC, the Center of Disease Control and Prevention. We also want to thank our Embrace breakout sponsors again, Lilly and Pfizer. After these announcements, we invite members of Sharsheret's Embrace community facing metastatic breast or advanced ovarian cancer to stay on for an exclusive Embrace breakout session that will be led by my colleague, Bonnie. Please take a moment to fill out a brief evaluation survey that is linked in the chat box now.

I also want to share about an upcoming webinar with you on Monday, July 27th at 8:00 PM Eastern, 5:00 PM Pacific. Join us for protecting oral health during cancer care with medical experts, Dr. Ariel Blanchard and Dr. Abida Taher, who will take an in depth look at the side effects on oral health and how to manage them during treatment for cancer. And the link to register for that is in the chat now.

Please remember that Sharsheret is here for you and your loved ones. Sharsheret provides emotional support, mental health counseling, and other programs designed to help navigate you through the cancer experience. All are completely free, completely confidential as well. Our contact information is in the chat box now and you can always find information about our upcoming webinars at the link in the chat as well. As we come to a close, we put the evaluation link in the chat box once more and thank you all very much. For those of you who are joining us for the Embrace breakout for the living with metastatic advanced cancer, please stay on the Zoom.

About Sharsheret

Sharsheret, Hebrew for “chain”, is an international non-profit organization, that improves the lives of Jewish women and families living with, or at increased genetic risk for, breast or ovarian cancer through personalized support and saves lives through educational outreach.

With regional offices in the Midwest, Northeast, Southeast, West, and Israel, Sharsheret serves 275,000 women, families, health care professionals, community leaders, and students.

Sharsheret creates a safe community for women facing breast cancer and ovarian cancer and their families at every stage of life and at every stage of cancer - from before diagnosis, during treatment and into the survivorship years. While our expertise is focused on young women and Jewish families, approximately 25% of those we serve are not Jewish. All Sharsheret programs serve all women and men.

As a premier organization for psychosocial support, Sharsheret works closely with the Centers for Disease Control and Prevention (CDC) and participates in psychosocial research studies and evaluations with major cancer centers, including Georgetown University Lombardi Comprehensive Cancer Center. Sharsheret is accredited by the Better Business Bureau and has earned a 4-star rating from Charity Navigator for four consecutive years.

Sharsheret offers the following national programs:

The Link Program

Peer Support Network, connecting women newly diagnosed or at high risk of developing breast cancer one-on-one with others who share similar diagnoses and experiences

- Embrace™, supporting women living with advanced breast cancer
- Genetics for Life®, addressing hereditary breast and ovarian cancer
- Thriving Again®, providing individualized support, education, and survivorship plans for young breast cancer survivors
- Busy Box®, for young parents facing breast cancer
- Best Face Forward®, addressing the cosmetic side effects of treatment
- Family Focus®, providing resources and support for caregivers and family members
- Ovarian Cancer Program, tailored resources and support for young Jewish women and families facing ovarian cancer
- Sharsheret Supports™, developing local support groups and programs

Education and Outreach Programs

- Health Care Symposia, on issues unique to younger women facing breast cancer
- Sharsheret on Campus, outreach and education to students on campus
- Sharsheret Educational Resource Booklet Series, culturally-relevant publications for Jewish women and their families and healthcare Professionals

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