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Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

2011

For calendar year 2011 or tax year beginning

, and ending

Name of foundation Maine Health Access Foundation, Inc.		A Employer identification number 01-0535144
Number and street (or P.O. box number if mail is not delivered to street address) 150 Capitol Street	Room/suite 4	B Telephone number (207) 620-8266
City or town, state, and ZIP code Augusta, ME 04330		C If exemption application is pending, check here ☐
G Check all that apply ☐ Initial return ☐ Final return ☐ Address change ☐ Initial return of a former public charity ☐ Amended return ☐ Name change		D 1. Foreign organizations, check here ☐ 2. Foreign organizations meeting the 85% test, check here and attach computation ☐
H Check type of organization: ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here ☐
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) ☒ \$ 105,475,609.	J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) _____	F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Part I

Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a).)

	(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
1 Contributions, gifts, grants, etc., received	38,060.		N/A	
2 Check ☐ if the foundation is not required to attach Sch. B				
3 Interest on savings and temporary cash investments	7,500.	7,500.		
4 Dividends and interest from securities	2,691,743.	2,691,743.		
5a Gross rents				
b Net rental income or (loss)				
6a Net gain or (loss) from sale of assets not on line 10	2,994,226.			
b Gross sales price for all assets on line 6a	38,197,781.			
7 Capital gain net income (from Part IV, line 2)		2,994,226.		
8 Net short-term capital gain				
9 Income modifications			61,055.	
10a Gross sales less returns and allowances				
b Less Cost of goods sold				
c Gross profit or (loss)				
11 Other income	1,730.	161,384.		Statement 1
12 Total. Add lines 1 through 11	5,733,259.	5,854,853.	61,055.	
13 Compensation of officers, directors, trustees, etc.	159,650.	8,000.		151,650.
14 Other employee salaries and wages	449,664.	0.		449,664.
15 Pension plans, employee benefits	100,762.	0.		100,762.
16a Legal fees Stmt 2	27,217.	0.		227,217.
b Accounting fees Stmt 3	43,362.	2,000.		41,362.
c Other professional fees Stmt 4	4,375.	0.		4,375.
17 Interest				
18 Taxes Stmt 5	75,717.	0.		44,717.
19 Depreciation and depletion	17,064.	0.		
20 Occupancy	59,396.	0.		59,396.
21 Travel, conferences, and meetings	72,059.	0.		72,059.
22 Printing and publications	26,657.	0.		26,657.
23 Other expenses Stmt 6	1,146,764.	443,124.		1,069,022.
24 Total operating and administrative expenses. Add lines 13 through 23	2,182,687.	453,124.		2,246,881.
25 Contributions, gifts, grants paid	1,457,891.			3,042,348.
26 Total expenses and disbursements. Add lines 24 and 25	3,640,578.	453,124.		5,289,229.
27 Subtract line 26 from line 12				
a Excess of revenue over expenses and disbursements	2,092,681.			
b Net investment income (if negative, enter -0-)		5,401,729.		
c Adjusted net income (if negative, enter -0-)			61,055.	

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21

Part II Balance Sheets

Attached schedules and amounts in the description column should be for end-of-year amounts only

		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash - non-interest-bearing			
	2 Savings and temporary cash investments	2,425,923.	1,395,146.	1,395,146.
	3 Accounts receivable ▶			
	Less allowance for doubtful accounts ▶	7,560.		
	4 Pledges receivable ▶			
	Less allowance for doubtful accounts ▶			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons			
	7 Other notes and loans receivable ▶			
	Less allowance for doubtful accounts ▶			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges	29,323.	40,217.	40,217.
	10a Investments - U S and state government obligations Stmt 7	7,781,090.	4,906,256.	4,906,256.
	b Investments - corporate stock			
	c Investments - corporate bonds Stmt 8	12,560,182.	16,038,214.	16,038,214.
Liabilities	11 Investments - land, buildings, and equipment basis ▶			
	Less accumulated depreciation ▶			
	12 Investments - mortgage loans			
	13 Investments - other Stmt 9	88,101,755.	82,274,962.	82,274,962.
	14 Land, buildings, and equipment basis ▶ 227,469.			
	Less accumulated depreciation ▶ 207,655.	34,280.	19,814.	19,814.
	15 Other assets (describe ▶ Statement 10)	832,000.	801,000.	801,000.
	16 Total assets (to be completed by all filers)	111,772,113.	105,475,609.	105,475,609.
	17 Accounts payable and accrued expenses	107,326.	26,618.	
	18 Grants payable	3,119,751.	1,535,294.	
Net Assets or Fund Balances	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable			
	22 Other liabilities (describe ▶ Statement 11)	85,000.	35,000.	
	23 Total liabilities (add lines 17 through 22)	3,312,077.	1,596,912.	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. ▶ ☒			
	24 Unrestricted	108,460,036.	103,878,697.	
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. ▶ ☐			
	27 Capital stock, trust principal, or current funds			
	28 Paid-in or capital surplus, or land, bldg, and equipment fund			
	29 Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balances	30 Total net assets or fund balances	108,460,036.	103,878,697.	
	31 Total liabilities and net assets/fund balances	111,772,113.	105,475,609.	

Part III Analysis of Changes in Net Assets or Fund Balances

1 Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	108,460,036.
2 Enter amount from Part I, line 27a	2	2,092,681.
3 Other increases not included in line 2 (itemize) ▶ Refunded grants	3	61,055.
4 Add lines 1, 2, and 3	4	110,613,772.
5 Decreases not included in line 2 (itemize) ▶ Net unrealized loss on investments	5	6,735,075.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	103,878,697.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)		(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Various investment securities		P		
b				
c				
d				
e				
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)	
a 38,197,781.		35,203,555.	2,994,226.	
b				
c				
d				
e				
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(i) Gains (Col. (h) gain minus col. (k), but not less than -0-) or Losses (from col. (h))	
(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any		
a			2,994,226.	
b				
c				
d				
e				
2 Capital gain net income or (net capital loss)		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 2 2,994,226.		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)		If gain, also enter in Part I, line 8, column (c) If (loss), enter -0- in Part I, line 8 3 N/A		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank.

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col. (b) divided by col. (c))
2010	5,012,253.	101,666,088.	.049301
2009	5,069,341.	92,131,179.	.055023
2008	5,867,395.	111,335,080.	.052700
2007	6,119,155.	123,844,069.	.049410
2006	4,976,013.	111,323,523.	.044699
2 Total of line 1, column (d)		2	.251133
3 Average distribution ratio for the 5-year base period - divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years		3	.050227
4 Enter the net value of noncharitable-use assets for 2011 from Part X, line 5		4	107,821,685.
5 Multiply line 4 by line 3		5	5,415,560.
6 Enter 1% of net investment income (1% of Part I, line 27b)		6	54,017.
7 Add lines 5 and 6		7	5,469,577.
8 Enter qualifying distributions from Part XII, line 4		8	5,289,229.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions)

1a Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary-see instructions)		1	108,035.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b			
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col (b)		2	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		3	108,035.
3 Add lines 1 and 2		4	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		5	108,035.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments			
a 2011 estimated tax payments and 2010 overpayment credited to 2011	6a	129,855.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	100,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	229,855.	
8 Enter any penalty for underpayment of estimated tax. Check here ☐ if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9		
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	121,820.	
11 Enter the amount of line 10 to be Credited to 2012 estimated tax ☐ 121,820. Refunded ☐	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?		X
1b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.		X
1c Did the foundation file Form 1120-POL for this year?		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation ☐ \$ 0. (2) On foundation managers ☐ \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ☐ \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS? If "Yes," attach a detailed description of the activities.	2	X
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	X
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.	5	X
6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7	X
8a Enter the states to which the foundation reports or with which it is registered (see instructions) ☐ ME		
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10	X

Form 990-PF (2011)

Part VII-A Statements Regarding Activities (continued)

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		X
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <u>www.mehaf.org</u>	13	X	
14	The books are in care of ► <u>Wendy J. Wolf, M.D., M.P.H.</u> Telephone no ► <u>(207) 620-8266</u> Located at ► <u>150 Capitol Street, Suite 4, Augusta, ME</u> ZIP+4 ► <u>04330</u>			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the year ► <u>15</u> N/A			
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for Form TD F 90-22.1 If "Yes," enter the name of the foreign country ►	16	Yes	No X

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly)		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person? ☐ Yes ☒ No		
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? ☐ Yes ☒ No		
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? ☐ Yes ☒ No		
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? ☒ Yes ☐ No		
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? ☐ Yes ☒ No		
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) ☐ Yes ☒ No		
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here ► ☐	1b	X
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2011?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2011? ☐ Yes ☒ No If "Yes," list the years ►		
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement - see instructions) N/A	2b	
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here ►		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No		
b If "Yes," did it have excess business holdings in 2011 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2011) N/A	3b	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2011?	4b	X

Form 990-PF (2011)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

☐ Yes ☒ No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

☐ Yes ☒ No

(3) Provide a grant to an individual for travel, study, or other similar purposes?

☐ Yes ☒ No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)?

☐ Yes ☒ No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

☐ Yes ☒ No

b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

Organizations relying on a current notice regarding disaster assistance check here

☒

5b

X

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A

☐ Yes ☐ No

If "Yes," attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

☐ Yes ☒ No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

If "Yes" to 6b, file Form 8870.

6b

X

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

☐ Yes ☒ No

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction?

N/A

7b

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation.

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 12		159,650.	19,135.	0.

2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
Barbara Leonard 150 Capitol Street, Augusta, ME 04330	VP - Programs 40.00	110,442.	17,055.	0.
Kimberly Crichton 150 Capitol Street, Augusta, ME 04330	Senior Program Officer 40.00	74,188.	12,404.	0.
Leonard Bartel 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	58,959.	14,704.	0.
Becky Hays Boober 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	65,688.	6,362.	0.
Catherine Luce 150 Capitol Street, Augusta, ME 04330	Grant Manager 37.50	57,455.	14,413.	0.
Total number of other employees paid over \$50,000				0

Form 990-PF (2011)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	<38,554.>
b	Average of monthly cash balances	1b	109,502,194.
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	109,463,640.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	109,463,640.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,641,955.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	107,821,685.
6	Minimum investment return. Enter 5% of line 5	6	5,391,084.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part)

1	Minimum investment return from Part X, line 6	1	5,391,084.
2a	Tax on investment income for 2011 from Part VI, line 5	2a	108,035.
b	Income tax for 2011 (This does not include the tax from Part VI)	2b	885.
c	Add lines 2a and 2b	2c	108,920.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,282,164.
4	Recoveries of amounts treated as qualifying distributions	4	61,055.
5	Add lines 3 and 4	5	5,343,219.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	5,343,219.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26	1a	5,289,229.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	5,289,229.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	5,289,229.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI, line 7				5,343,219.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			4,684,896.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2011				
a From 2006				
b From 2007				
c From 2008				
d From 2009				
e From 2010				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2011 from Part XII, line 4 ▶ \$ 5,289,229.				
a Applied to 2010, but not more than line 2a			4,684,896.	
b Applied to undistributed income of prior years (Election required - see instructions)		0.		
c Treated as distributions out of corpus (Election required - see instructions)	0.			
d Applied to 2011 distributable amount				604,333.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable amount - see instructions		0.		
e Undistributed income for 2010. Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2011 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2012				4,738,886.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009				
d Excess from 2010				
e Excess from 2011				

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
See statement 14		Public	Enhance health care in Maine	3,042,348.
Total			3a	3,042,348.
b Approved for future payment				
See statement 14		Public	Enhance health care in Maine	1,535,294.
Total			3b	1,535,294.

Part XVII

Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

- | | | Yes | No |
|----------|--|--------------|----|
| 1 | Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? | | |
| a | Transfers from the reporting foundation to a noncharitable exempt organization of | | |
| | (1) Cash | 1a(1) | X |
| | (2) Other assets | 1a(2) | X |
| b | Other transactions | | |
| | (1) Sales of assets to a noncharitable exempt organization | 1b(1) | X |
| | (2) Purchases of assets from a noncharitable exempt organization | 1b(2) | X |
| | (3) Rental of facilities, equipment, or other assets | 1b(3) | X |
| | (4) Reimbursement arrangements | 1b(4) | X |
| | (5) Loans or loan guarantees | 1b(5) | X |
| | (6) Performance of services or membership or fundraising solicitations | 1b(6) | X |
| c | Sharing of facilities, equipment, mailing lists, other assets, or paid employees | 1c | X |
| d | If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. | | |

[illegible]

- 2a** Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? ☐ Yes ☒ No
- b** If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship
N/A		

Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Signature of officer or trustee: [Signature] Date: 11/9/12 Title: PRESIDENT (PO)

May the IRS discuss this return with the preparer shown below (see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
	E. Drew Cheney	<i>E. Drew Cheney</i>	11/7/12		P00182972
	Firm's name ▶ Baker Newman & Noyes				Firm's EIN ▶ 01-0494526
	Firm's address ▶ Box 507 Portland, ME 04112				Phone no (207) 879-2100

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No 1545-0047

2011

Name of the organization

Employer identification number

Maine Health Access Foundation, Inc.

01-0535144

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☐ 501(c)() (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☒ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

Name of organization	Employer identification number
Maine Health Access Foundation, Inc.	01-0535144

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Grantmakers in Health 1100 Connecticut Ave., NW, 12th Floor Washington, DC 20036	\$ 15,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
2	Tufts Medical Center, Inc. 800 Washington Street Boston, MA 02111-1533	\$ 23,060.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II if there is a noncash contribution.)

Employer identification number

01-0535144

[illegible]

Name of organization

Employer identification number

Maine Health Access Foundation, Inc.

01-0535144

Part III

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) ► \$

Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

Form 990-PF	Other Income		Statement	1
Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	
Expense rebates	1,300.	0.		
Proposal reviews	400.	0.		
Miscellaneous	30.	0.		
Net adjustment for investment income on schedules K-1 (not recorded on books)	161,384. <161,384.>	161,384. 0.		
Total to Form 990-PF, Part I, line 11	1,730.	161,384.		

Form 990-PF	Legal Fees		Statement	2
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal	27,217.	0.		227,217.
To Fm 990-PF, Pg 1, ln 16a	27,217.	0.		227,217.

Form 990-PF	Accounting Fees		Statement	3
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting	43,362.	2,000.		41,362.
To Form 990-PF, Pg 1, ln 16b	43,362.	2,000.		41,362.

Form 990-PF	Other Professional Fees			Statement	4
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Consulting on behalf of MeHAF	4,375.	0.		4,375.	
To Form 990-PF, Pg 1, ln 16c	4,375.	0.		4,375.	

Form 990-PF	Taxes			Statement	5
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Excise taxes	31,000.	0.		0.	
Payroll taxes	44,717.	0.		44,717.	
To Form 990-PF, Pg 1, ln 18	75,717.	0.		44,717.	

Form 990-PF	Other Expenses			Statement	6
Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes	
Office supplies & expenses	33,552.	0.		33,552.	
Website	18,129.	0.		18,129.	
Insurance	15,606.	0.		15,606.	
Telecommunications	10,747.	0.		10,747.	
Investment fees	443,124.	443,124.		0.	
Program related contracts (see statement 14)	300,003.	0.		300,003.	
Other program-related funding and minor donations (see statement 14)	23,350.	0.		23,350.	
Program related expenses: consultants	82,025.	0.		382,028.	
Program related expenses: conferences	12,331.	0.		12,331.	
Program related expenses: grant management	13,762.	0.		13,762.	
Program related expenses: communications	38,963.	0.		38,963.	

Ted Sussman, M.D. 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Shirley Weaver, PhD 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Neil Rolde 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Cheryl Lee Rust 150 Capitol Street, Suite 4 Augusta, ME 04330	Secretary 3.00	0.	0.	0.
Lee Webb 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Jeff Wahlstrom 150 Capitol Street, Suite 4 Augusta, ME 04330	Chair & Trustee 4.00	0.	0.	0.
Sara Gagne-Holmes, ESQ. 150 Capitol Street, Suite 4 Augusta, ME 04330	Vice Chair 3.00	0.	0.	0.
Kenneth Hews 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 3.00	0.	0.	0.
Constance Sandstrom, MPA 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.

Totals included on 990-PF, Page 6, Part VIII

159,650.

19,135.

0.

Form 990-PF	Other Revenue	Statement	13
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Description	Bus Code	Unrelated Business Inc	Excl Code	Excluded Amount	Related or Exempt Func- tion Income
Expense rebates			01	1,300.	
Proposal reviews			01	400.	
Miscellaneous			01	30.	
Net adjustment for investment income on schedules K-1				161,384.	

Maine Health Access Foundation, Inc.

01-0535144

(not recorded on books)

<161,384.>

Total to Form 990-PF, Pg 12, ln 11

1,730.

Part IX-A: Summary of Direct Charitable Activities

The mission of the Maine Health Access Foundation (MeHAF) is to *promote access to quality health care, especially for those who are uninsured and underserved, and improve the health of everyone in Maine*. The foundation is a mission-driven organization that uses its human and fiscal resources to ensure that people have access to high quality, affordable health care for the benefit of preserving or achieving better health. As a statewide organization, we serve all Maine people. However, people with low incomes, those affected by health disparities, the elderly, and people suffering from chronic illnesses in Maine face disproportionate barriers to accessing health care services and achieving optimal health. For this reason, our programs are especially directed toward initiatives and projects that focus on more vulnerable people.

Since the foundation's inception in April 2000, MeHAF has strived to be an independent and visionary leader in health philanthropy. The Board, Community Advisory Committee and staff focus on activities that advance our core guiding values as we work with nonprofit partners and key leaders in the public and private sector to

- act as a catalyst for change;
- promote innovation and vision;
- foster community-based collaboration and partnerships;
- serve as an informed convener and educator;
- exercise responsible stewardship.

From the start, our Board has consistently directed our philanthropic resources to fundamentally and thoroughly change the character of health care delivery in ways that benefit those who are most vulnerable. We hypothesized that if the system could work well for the most vulnerable, it should work well for everyone in Maine. Since 2002, MeHAF has awarded over \$44 million in grants and program support to more than 250 organizations across Maine to advance transformative change driven by sound public policy and innovative program initiatives.

In our first decade, MeHAF worked hand in hand with hospitals, providers, patients, advocates, insurers, businesses and many others to help Maine people gain better access to higher quality health care. However, it's what patients do when they leave the doctor's office or the hospital and return to their homes and to their communities that can really make the difference in restoring or preserving health.

In 2010, the foundation initiated a comprehensive nine-month strategic planning process to guide MeHAF's grant and program activities for the next five years (2011-2016). This planning process included engaging the services of consultants with national philanthropic strategic planning expertise who conducted internal and external stakeholder interviews, environmental assessments that evaluated the demographic, social and economic landscape of Maine, and research of best practices and innovative program approaches advanced by both public and private organizations in Maine and across the nation. All this information guided the development of specific program strategies for MeHAF moving forward.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

The internal and external discovery process revealed high levels of satisfaction with MeHAF's work to strengthen the safety net, promote patient and family-centered care, and advance health reform, and there was general support for the foundation to continue working in these areas. However, there was agreement across all stakeholders that MeHAF should embrace a more overt focus on improving health, with a special emphasis on insuring that all grant and program activities strive to achieve better health status. In addition, several important changes in the external environment, such as the passage of national health reform and the continued growth of Maine's aging population, should shape our grants and programs moving forward. The planning process also affirmed the importance of deep staff expertise and sustained engagement with grantees and other key partners as a core component to drive transformative systemic change of Maine's health care system.

The strategic planning process concluded in April 2011 with Board approval of the four strategic priorities that will serve as the focus for our major grant and program funding over the next five years. This work will build on a solid foundation of current innovative, evidence based practices with the aim of spreading rapid adoption and implementation of successful models that can expand access, improve quality, contain costs, and bridge the divide between clinical settings and communities where people live, work and play. Executing the specific program goals for each priority will require long term partnerships with our grantees, other key stakeholders and people in Maine communities we're committed to serve, and may necessitate additional staff resources with new expertise to be successful.

MeHAF's four new strategic priorities include:

- **Advancing Health System Reform:** Everyone in Maine deserves access to affordable, high quality health care to ensure better health. MeHAF supports key strategies and policy changes that expand access to more affordable health insurance, promote better value and quality through payment reforms, and offer better coordination and collaboration between the health care delivery systems and community resources. We also support public education and outreach so Maine people clearly understand the facts and impact of changes in health care policy. Many of our initiatives align and leverage opportunities, resources and policy improvements offered within national and state-level health system reform efforts.
- **Promoting Patient Centered Care:** People tell us the health care system lacks organization, is difficult to navigate, and hard to understand. This is particularly an issue for those who are uninsured. MeHAF continues to promote more patient-centered and seamless care, particularly through the coordination and integration of primary care with behavioral health, dental care, specialty care, and other services. A centerpiece of our work is the Integration Initiative, a ten year, \$10 million commitment to promote patient-centered care by improving coordination and seamless care delivery between behavioral health and primary care.
- **Improving Access to Quality Care:** Affordable coverage with access to quality health care is increasingly out of reach for many Maine families and businesses. This is particularly the case when Maine's economy is struggling. As the number of uninsured rises, tremendous pressure is placed on Medicaid (MaineCare) and other programs designed to meet the needs of people with low incomes. MeHAF program and grant funding brings providers, social service agencies, advocacy organizations and other community groups together to assist those who are eligible to enroll in all available private and public programs, and to help those who are uninsured find quality, coordinated services through local safety net providers.

- **Achieving Better Health in Communities:** Good health requires more than just receiving quality health care services. People need resources and support in their communities to sustain and improve health. Working with other funders, MeHAF is reaching out to community leaders and stakeholders to learn how we can partner with them to promote better health. This outreach will guide programs and grantmaking aimed at supporting fully integrated, collaborative community-based strategies to improve health in the coming years.

These four priorities reflect the Boards' understanding that many people in Maine face significant barriers to improving or maintaining good health. Not having health insurance is a strong predictor of premature disability and death. Lack of access to health care services can result in delayed diagnosis, treatment and poorer outcomes. The addition of the strategic priority that focuses on preserving and improving health is an acknowledgment that promoting access to health care services is just part of the equation for achieving our mission. MeHAF also want to ensure that that access to care actually results in better health, therefore we must help bridge the divide between the health care sector and communities so people have the tools, resources and support they need to improve their health where they live, work and play.

In 2011, MeHAF supported many innovative partners who know the value of linking health and health care. The foundation is learning from their work about how important, yet how challenging, forging these linkages can be. The following represent examples of projects funded by MeHAF grant and program support in 2011 that are helping to advance public understanding of and engagement in health and health care:

Health Reform for ME

In March 2010, the federal Affordable Care Act (ACA) was signed into law following more than a year of rancorous debate. When the ink was dry, it left many people wondering, "Is there anything in this for me, and who can I trust to give me factual information?" Through its ***Informing and Engaging Maine People about Health Reform*** grant program, MeHAF seized an opportunity to deliver accurate information about new health benefits to the communities of Maine people most likely to need it. Ten expert and trusted nonprofit advocacy organizations worked together to prioritize the important nuts and bolts messages about the ACA and determine how to deliver them to their stakeholders, cutting through the rhetoric. The group developed a brochure that would work for all constituencies.

One participant, the Eastern Area Agency on Aging, delivered the potentially confusing but critical details to its community of seniors. According to Director of Community Services, Dyan Walsh, "For a lot of people it took hearing about the actual benefits two or three times to truly understand because the public conversation had been so charged." Face to face meetings work best for seniors served by Eastern Area Agency on Aging. Volunteers and staff were prepared to provide information and details at agency Community Cafés while social media tools provided information to caregivers and families.

The Maine People's Resource Center also held face-to-face conversations as canvassers knocked on thousands of doors and spoke with 902 residents. "We adjusted our approach over the grant period, from *telling* people about available benefits to starting the conversation by *asking* people about their personal experiences with access to care," said Amy Halsted, MPRC Associate Director. "Asking questions got people to actually stop and consider there might be new benefits available for them or someone they care about." In follow up calls a week later, 30% had already

shared the information with someone else. The outreach group will continue its work into 2012 with renewed funding; ensuring all Maine people have timely information about benefits to which they are entitled.

The Health of Maine's Bottom Line

A vibrant business sector is on everyone's priority list. When Maine Development Foundation (MDF) and the State Chamber of Commerce asked Maine employers of all sizes what prevented growth, insurance and spiraling health care costs topped the list. Maine employers want to know if new state and federal reform laws will help or hinder their bottom lines. As a trusted, nonpartisan economic development organization, MDF offers common ground for discussing complex issues based on facts, without spin. With MeHAF support, MDF convened a business advisory group to guide how MDF and others could help employers understand these new laws. After Maine's legislature enacted sweeping changes in health insurance regulations, MeHAF, MDF and others organized presentations in Bangor, Lewiston and Augusta featuring health care experts from across the spectrum to provide the facts. It's what businesses need to make good decisions.

Healthy Micro Management

Large employers invest in worksite wellness programs because they pay dividends in productivity and in reducing absenteeism. Somerset County's ***Micro-Wellness Project for Small Business*** offers financial incentives through grants that mimic the wellness tax credits received by large companies for worksite programs under the Affordable Care Act. Partially funded by MeHAF through its Payment Reform Initiative, the goal is to make the case that health insurers could support such incentives, even for the 91% of businesses in the county that have fewer than 20 employees. A group comprised of the Greater Somerset Public Health Collaborative, Medical Care Development, the Somerset County Chamber of Commerce Wellness Council, Main Street Skowhegan and Redington-Fairview General Hospital offers centralized, shared resources to help businesses implement low-cost strategies proven effective at reducing employee health risks. Tobacco use policies, walking breaks, cash and time-off incentives for participation are paying off for even the smallest companies.

The Power of Proof

Business management gurus say, "You can't fix what you don't measure." Increasingly, health system gurus follow the same creed. Tribal Health Leaders from the four Maine Waponahki tribes: the Houlton Band of Maliseet, Aroostook Band of Micmac, Passamaquoddy at Indian Township and Pleasant Point and Penobscot have recently completed the first combined health assessment of their tribes in order to validate observations about the health of Maine Tribal members. It is a milestone survey that demonstrates national leadership, establishes a benchmark of the current health status of the Waponahki people and identifies areas for health improvement.

"We have done what no other tribe has done. We have created the first tool to completely assess the health status of American Indians and Alaskan Native people, and we did it here," said Sandra Yarmal, Health Director of the Passamaquoddy Tribe at Pleasant Point. Notably, the assessment is the only survey ever conducted in an Indian language.

The state of Maine does not have an accurate method for tracking the race or culture-specific health data that would lead to a better understanding of the health of Tribal communities. "We have talked about the need for this data for more than ten years—accurate documentation that is

not miscounted or misquoted,” said Patricia Knox-Nicola, Tribal Principal Investigator and Project Director of the Waponahki Tribal Health Assessment. Funded through grants from MeHAF and other funders, the extensive survey provides a foundation for planning health improvements.

The data underline what the tribal health directors have observed for years. While they offer excellent health care in their facilities, the roots of many health problems must be addressed beyond the walls of the health centers. The assessment will support conversations with other members of tribal government to address the health of the community. It will also serve as the foundation for Tribal research and grant proposals to support solutions to the health priorities identified.

Just the Facts

“What would you like to know about managing stress and how would you like us to tell you about it?” With support from a MeHAF *Getting Down to Basics* grant, Community Concepts, Inc. (CCI) and its partner, Tri-County Mental Health, asked these questions of groups of clients: Franklin County Head Start parents, Androscoggin County support group members and audience members of an educational series, before compiling and distributing information. The “focus groups” wanted easy-to-digest, written information about stress and coping skills along with contact information in the event they needed additional support. They did not want television, radio, Facebook, webcasts or workshops. No time commitment or driving. This successful, community-driven collaboration has led CCI and Tri-County to cement relationships and to identify more strategic ways to work together on new grant projects to benefit the community.

Breathing Easy

In partnership with the Penquis CAP agency, Bangor Health & Community Services’ (BH&CS) *Healthy Homes Asthma Project* improves respiratory health via housing audits and weatherization. Because what is in a home impacts residents’ health, BH&CS sought to increase referrals to Penquis to address asthma and provide asthma education with support from a *Getting Down to Basics* grant from MeHAF. While the “Homes” funding faced uncertainty due to a program overhaul at the CDC, the MeHAF grant allowed BH&CS to continue to build relationships outside the bureaucracy, with the flexibility needed to meet homeowner needs for information and improvements. Through outreach to Community Care Teams and new contracts, BH&CS is better positioned to deliver ongoing asthma education and housing audits throughout the region.

“Green Eggs and Ham. . . and Kale”

Good food and good books were delivered together weekly over the summer into five Sedgwick neighborhoods that house families well known to local school librarian, Margaret Bixby. “The Magic Food Bus” played a pivotal role in Healthy Peninsula’s *Good Food Project*, funded through MeHAF’s *Fund for the Future* program in 2011. Delivering fresh produce to lower income neighborhoods, with recipes and preparation tips, along with library books to promote summer reading made it easy for families to try new foods without a special trip to a farmers market or other, less convenient places.

Clean Beets on a Budget

Students in Central Lincoln County’s AOS 93 know that you can boil beets or put them in a cake. Through a MeHAF *Fund for the Future* grant, these students now receive at least six locally

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

grown fresh items on their school lunch plates a week, augmented by a curriculum that teaches them about food. From produce to seafood, kids are learning about where their food comes from and how to prepare it. Thanks to the efforts of Focus on Agriculture in Rural Maine Schools (FARMS), school nutrition directors are connecting with more convenient and dependable sources for fresh foods, and local farmers are able to supply the schools at a reasonable profit while learning how to process and package fresh foods for institutions.

These projects represent examples of how MeHAF deploys an array of strategies to advance our work. In 2011, we used single and multi-year grants, consultant engagement to advance targeted work and technical assistance on various initiatives, and conducted research and analysis to advance our priorities and our mission.

The following is a complete list of the grant and contract payments provided in fiscal year 2011.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
Advancing Health System Reform - Cost Containment/Payment Reform									
2011C-0003	HealthInfoNet 125 Presumpscot Street Box 8 Portland, ME 04103	\$198,659 00	\$99,642 00	\$99,017 00	X				HealthInfoNet, as the statewide health information exchange and one of the leading exchanges in the country, is well positioned to play a critical role in the implementation and evaluation of payment reform initiatives in Maine. HealthInfoNet will build a centralized, robust statewide health data information system to support various payment reform efforts across the State of Maine. HealthInfoNet will expand the clinical data collected by the exchange, transfer the data to a data warehouse environment, demonstrate integration of the statewide clinical data set with claims data, and build the capacity for data use. The project will develop a data policy and related procedures for data access and use while also planning for the use of clinical data in a Personal Health Record application.
2010D-0005	Maine Health Management Coalition Foundation 2 Union Street, Suite 301 Portland, ME 04101	\$198,256 00	\$99,128 00	\$99,128 00	X				MHMF will develop an 'ACO development road map' that will be a replicable and supportive pathway, leveraging the expertise of professionals available through its current RWJF Payment Reform grant, the resources and expertise of statewide QI and payment reform projects in which we are principles, and the expertise of MHC stakeholders. Our project will provide (1) support for organizations transitioning to ACO status, (2) peer-to-peer education and support for specific aspects of ACO development, (3) consideration for underserved populations, (4) a common set of measures, (5) engagement of employers and payers, (6) engagement of consumers, and, (7) public education on payment reform, system transformation, and MHC.
2011C-0004	Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	\$200,000 00	\$100,000 00	\$100,000 00	X				The Maine Primary Care Association (MPCA) has identified a cross-cutting team of partners to engage the small business community and network of safety net providers in the formation of a successful Maine-based Consumer Operated and Oriented Plan (CO-OP). This project will design the benefits and other attributes that prospective owners of a Maine-based Consumer Operated and Oriented Plan (the enrolled subscribers themselves) want and need in order to motivate participation and enrollment and will be based on cost, quality and utilization data. Through the successful formation of a CO-OP with a well-informed plan design, this project will increase access to coverage through the upcoming Exchange and reduce the costs of this coverage to small businesses while leveraging the existing infrastructure of supports for healthier outcomes and improved overall population health.
2010D-0009	Maine Quality Counts 30 Association Drive P O Box 190 Manchester, ME 04351	\$199,959 00	\$99,975 00	\$99,984 00	X				Maine Quality Counts will create a sustainable structure and payment system to support community-based, multi-disciplinary primary care-integrated "Community Health Teams" (CHTs) to improve care and reduce avoidable costs for Maine people, especially those with complex or chronic conditions. To do so, Quality Counts will first define the parameters of a CHT model in Maine that is patient-centered, integrated with other improvement and payment reform initiatives in the state, and can be used as the basis for payment by private and public payers.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2010D-0007	MaineGeneral Health And Affiliates 6 E Chestnut St Augusta, ME 04330-5717	\$199,885 00	\$99,928 00	\$99,957 00	X				MaineGeneral Health and the State of Maine, are embarking on a five year pilot to effect delivery system reform aimed at redesigning both clinical care and payment systems that support and accept responsibility for caring for a defined patient population and delivering comprehensive care that achieves the "Triple Aim" outcomes (1) improving population health, (2) improving patient experience of care, and, (3) decreasing healthcare costs. The objective for this project is to address Patient and Family Engagement in Primary Care Transformation. The goal is longitudinal patient-focused care that routinely incorporates values of patients and families
2010D-0012	Medical Care Development 11 Parkwood Drive Augusta, ME 04330	\$200,000 00	\$100,000 00	\$100,000 00	X				Medical Care Development (MCD) in partnership with the Greater Somerset Public Health Collaborative (GSPHC) -- the Somerset County HMP-- proposes to develop a worksite wellness add-on to coverage for micro-businesses and individuals. The add-on will bundle services needed to earn tax credits or discounts for wellness, as described in the ACA, enabling individuals and very small businesses to take advantage of this opportunity. MeHAF funding will allow MCD to simulate a tax credit or incentive payment through a nominal rebate to participating sites. Working with insurers, brokers, employees of very small firms and community-based wellness and primary care providers in a governing committee and advisory task forces, we will develop a product, define criteria for meeting wellness objectives, test a prototype for a worksite wellness tax credit, and market a micro-worksite wellness add-on to insurers
2010D-0008	Prescription Policy Choices P O Box 204 Hallowell, ME 04347	\$177,865 00	\$88,378 00	\$89,487 00	X				Prescription Policy Choices' (PPC) "Show ME the Evidence. Reform to Improve Quality and Contain Costs" project will assist with meeting specific goals and objectives of Maine's State Health Plan including reducing inefficient practices and waste and paying for what matters in an effort to achieve improve outcomes, better health status, and affordable health care and prescription drugs for all Maine people. Show ME the Evidence will help ensure access to quality and affordable health care under Maine's public and private health programs and for uninsured and underinsured people living in Maine who are likely to become insured as the Affordable Health Care Act is implemented in Maine
2011C-0008	State of Maine, DHHS, MaineCare 11 State House Station Augusta, ME 04333	\$200,000 00	\$100,000 00	\$100,000 00			X		MaineCare will develop and implement a Medicaid Health Homes program that supports practice and payment change needed to deliver more patient-centered, high-value care. Medicaid Health Home services will be delivered through a combination of enhanced primary care/Patient Centered Medical Home (PCMH) services, linked with Community Care Teams to improve care and lower costs for the highest-need MaineCare members. MaineCare will also implement a "MaineCare Accountable Communities" program that supports both practice and payment change needed for health systems, hospitals, and other provider groups to deliver more patient-centered, high-value care. Medicaid will develop alternative contracting models for providers that are willing to partner in the MaineCare Accountable Communities program, which will set expected targets for quality and cost outcomes and encourage flexibility and innovation from the provider community

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2011CON-0012	USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P.O. Box 9300 Portland, ME 04104-9300	\$102,401.00	\$37,443.00	\$64,958.00	X				Evaluation of MeHAF's Advancing Cost Containment and Payment Reform Strategies in Support of the Affordable Care Act
Advancing Health System Reform - Policy and Leadership Development									
2010FI-0007	Blue Cross and Blue Shield of Massachusetts Foundation, Inc. 401 Park Drive M/S 01/04 Boston, MA 02215	\$17,000.00	\$17,000.00	\$0.00	X				This grant will be used to sponsor the participation of a health care journalist from Maine in the Health Coverage Fellowship of the Blue Cross Blue Shield of Massachusetts Foundation. The fellowship is an intensive, nine-day program that develops participants' contacts within health care and knowledge of health care and health reform issues.
2011FI-0002	Center for Health Policy Development/NASHP 10 Free Street Portland, ME 04101	\$9,942.46	\$9,942.46	\$0.00	X				MeHAF funds will be used to sponsor health policy leaders from Maine to attend NASHP's State Health Policy Conference.
2009FI-0002	Daniel Hanley Center for Health Leadership PO Box 15275 Portland, ME 04112	\$52,000.00	\$15,000.00	\$0.00	X				The "MeHAF Scholars" program will assure that individuals from health-related organizations that serve MeHAF's priority populations can fully participate in the statewide Hanley-Institute for Civic Leadership (ICL) Health Leadership Development (HLD) course. Increased enrollment from this sector will build leadership capacity, contribute to the diversity of each HLD class and build understanding and awareness about issues relating to access, health disparities and the needs of underserved populations in Maine. It will also stimulate greater collaboration among health and health care leaders as they address these issues in the months and years ahead.
2010FI-0008	Maine Development Foundation 295 Water St., Suite 5 Augusta, ME 04093	\$41,800.00	\$41,800.00	\$0.00	X				Maine Development Foundation (MDF) is hosting a non-partisan health care forum for Maine state legislators. This is part of MDF's 2010-2011 Policy Leaders' Academy. Legislators will attend presentations and have the opportunity to question experts on issues of access, health and wellness, cost containment, and advancing health reform in Maine.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
Advancing Health System Reform - Public Education and Advocacy									
2011D-0001	Consumers for Affordable Health Care Foundation 12 Church St P O Box 2490 Augusta, ME 04338-2490 Augusta, ME 04330	\$125,000 00	\$50,000 00	\$75,000 00	X				Consumers for Affordable Health Care (CAHC) will focus on administrative processes in five key areas: community rating, the exchange, reinsurance, geographic access, and out-of-state insurance. These areas are complex and intertwined, and are fundamental to CAHC's mission. CAHC's goal is to advance the voice of uninsured, underinsured, and underserved people in administrative forums and by doing so, increase their access to quality affordable health care and minimize potentially negative impacts.
2010F1-0006	Grantmakers In Health 1100 Connecticut Ave, NW, Suite 1200 Washington, DC 20036	\$75,000 00	\$25,000 00	\$25,000 00	X				GIH will support the philanthropic field in defining its role in the implementation of health reform and considering the implications of effective implementation for future grantmaking. GIH's goal is to provide sound, strategic, and actionable information and advice to funders, as they (1) raise the visibility of emerging issues, promising approaches, and critical roles that foundations can play, (2) frame the policy context that can impede or further efforts to bring change, (3) institutionalize opportunities for funders to candidly exchange information and learn from each other's experience, and (4) facilitate communication between funders and federal policymakers.
2011D-0002	Indian Township Tribal Government/Passamaquoddy Health Center P O Box 97 Princeton, ME 04668	\$125,000 00	\$50,000 00	\$75,000 00			X		The Waponahki Health Policy Collaboration provides a forum for Maine Tribes, their leadership and other appropriate staff to obtain an understanding of how the provisions of the Affordable Care Act may impact their communities. Specific emphasis will be given to the Maine Health Insurance Exchange due to the potential impact that it may have on the Indian Health System for Maine Tribes. Expanded coverage under Private Insurance and Medicaid Eligibility provides an opportunity for increased access to health care for many Native American including members of the Maine Tribes. Additionally, the Waponahki Health Policy Collaboration will engage Tribal and State officials to develop a formal consultation process reflective of the government-to-government relationship.
2011D-0004	Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	\$124,882 00	\$50,000 00	\$74,882 00	X				Maine Equal Justice's (MEJP) goal is to maximize the benefits of the ACA for people with low income. MEJP will seek to ensure that Maine achieves effective integration of MaineCare and the Exchange, and that new Medicaid eligibility policies and procedures facilitate access for eligible beneficiaries. MEJP will focus its efforts on implementation of the State Exchange, Medicaid reforms that impact coordination with the Exchange, Medicaid expansions, and the Basic Health Program.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2011D-0005	Maine Medical Education Trust 30 Association Drive P O Box 190 Manchester, ME 04351	\$120,750 00	\$46,000 00	\$74,750 00	X				In furtherance of its mission to advance the quality of medicine in Maine and promote the health of all Maine citizens, the MMEET seeks to ensure access to primary care, preventive benefits and behavioral health services in the face of significant regulatory changes proposed under the Affordable Care Act. MMA's proposed activities center around acquiring meaningful, informed input by patients in the priority populations (low income, uninsured and those with behavioral and mental health conditions), providers and appropriate organizations to enhance the quality of rulemaking comments submitted directly to administrative agencies and to aid in the development of MMA's administrative rulemaking comments in five key areas
2011B-0003	Maine Migrant Health Program P O Box 405 Augusta, ME 04332	\$4,770 48	\$4,770 48	\$0 00	X				REinFORMA! will share information with migrant Hispanic/Latino farmworkers in Washington and Aroostook counties. Using information from Maine Equal Justice Partners, Maine Migrant Health Program in partnership with Mano en Mano intends to create culturally-appropriate Spanish language resources about health reform. These resources will be shared at educational events which will be coordinated by outreach staff and Camp Health Aides (CHAs). Ultimately, the goal of this project is to create access to accurate information about health reform and assure farmworkers are able to enroll in benefits for which they are eligible
2011B-0004	Somali Culture And Development Association (MESOM) 107 Elm Street - Suite 100E P O Box 8676 Portland, ME 04101	\$5,000 00	\$5,000 00	\$0 00	X				The Somali Culture and Development Association (MESOM) will provide health reform education to the Somali and Muslim communities of Cumberland County, with targeted outreach to Somalis in Lewiston/Auburn, and Iraqi Muslims in Biddeford and Portland. The proposal utilizes successful and effective formal and informal outreach strategies
2010CON-0012	FrameWorks Institute 1776 I (Eye) Street, NW 9th Floor Washington, DC 20006	\$20,000 00	\$10,000 00	\$0 00				X	FrameWorks Institute will provide technical assistance to support MeHAF's Health Reform I grantees inform the public about the new provisions of the health care reform law. Specifically, FrameWorks will provide two half-day workshops, technical assistance to the group facilitator and application tools
Advancing Health System Reform - Other									
2011GOS-0001	Consumers for Affordable Health Care Foundation 12 Church St P O Box 2490 Augusta, ME 04338-2490	\$20,000 00	\$20,000 00	\$0 00	X				This grant is to support core operations for the period of September 6 to November 30, 2011. This core support grant is unrestricted funding that will enable the organization to carry out its mission. It can be used to underwrite administrative and infrastructure costs, and/or maintain core programs and essential staff
2011GOS-0002	Maine Center for Economic Policy 66 Winthrop Street P O Box 437 Augusta, ME 04332	\$20,000 00	\$20,000 00	\$0 00	X				This grant is to support core operations for the period of September 6 to November 30, 2011. This core support grant is unrestricted funding that will enable the organization to carry out its mission. It can be used to underwrite administrative and infrastructure costs, and/or maintain core programs and essential staff

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011GOS-0003	Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	\$20,000 00	\$20,000 00	\$0 00	X				This grant is to support core operations for the period of September 6 to November 30, 2011. This core support grant is unrestricted funding that will enable the organization to carry out its mission. It can be used to underwrite administrative and infrastructure costs, and/or maintain core programs and essential staff.
2011GOS-0004	Maine Medical Education Trust 30 Association Drive P O Box 190 Manchester, ME 04351	\$20,000 00	\$20,000 00	\$0 00	X				This grant is to support core operations for the period of September 6 to November 30, 2011. This core support grant is unrestricted funding that will enable the organization to carry out its mission. It can be used to underwrite administrative and infrastructure costs, and/or maintain core programs and essential staff.
2011GOS-0005	Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	\$20,000 00	\$20,000 00	\$0 00	X				This grant is to support core operations for the period of September 6 to November 30, 2011. This core support grant is unrestricted funding that will enable the organization to carry out its mission. It can be used to underwrite administrative and infrastructure costs, and/or maintain core programs and essential staff.
2011FI-0001	State of Maine, DHHS, Office of Quality Improvement 221 State Street Augusta, ME 04333	\$15,000 00	\$15,000 00	\$0 00			X		DHHS, Office of MaineCare Services will create a data analytic file and a high-level profile of the cost and use of services used by people who are dually eligible for MaineCare and Medicare services. The analytic file will inform policy and planning for dually eligible MaineCare members.
Subtotal, Advancing Health Reform Grant (25) & Contract (2) Payments = \$1,264,006.94									
Strengthening Maine's Safety Net - Oral Health									
2010FE-0003	Community Dental 276 Canco Rd Portland, ME 04103	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved.
2010FE-0002	Community Dental 276 Canco Rd Portland, ME 04103	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011F-0001	Community Dental 276 Canco Rd Portland, ME 04103	\$23,271 00	\$23,271 00	\$0 00	X				Community Dental will implement the following recommendations for improvement recommended by Safety Net Solutions in their May 2011 assessment (1) Implement the Electronic Dental Record (EDR) in the Portland Center, (2) Improve scheduling by front desk staff and involvement of clinical providers, (3) Convene the entire organization's staff to empower them to implement the "Vision", encourage team building, and engage in organizational problem solving, and (4) Partner with Public Health Hygienists to provide comprehensive oral health care in public schools
2010E-0001	DentaQuest Institute, Inc 2400 Computer Drive Westborough, MA 01581	\$60,000 00	\$30,000 00	\$0 00	X				Safety Net Solutions will work with eight oral health providers to provide data-driven practice analysis, development of a performance improvement plan, improvement plan implementation support, and on-going collaborative learning opportunities for twelve months on national and regional issues of interest
2010E-0004	Downeast Health Services, Inc 52 Christian Ridge Road Ellsworth, ME 04605	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved
2011F-0002	Downeast Health Services, Inc 52 Christian Ridge Road Ellsworth, ME 04605	\$20,000 00	\$20,000 00	\$0 00	X				Downeast Health Services will expand its technology capacity to utilize digital x-ray and to fully utilize Dentrix electronic dental records. Downeast Health owns digital x-ray equipment and runs the most current version of Dentrix (G4 version 14 22), but does not have adequate technology systems to support use
2010E-0005	Health Access Network, Inc 175 West Broadway PO BOX 99 Lincoln, ME 04457	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved
2011F-0003	Health Access Network, Inc 175 West Broadway PO BOX 99 Lincoln, ME 04457	\$13,200 00	\$13,200 00	\$0 00	X				Health Access Network will implement Dentrix, an electronic medical record in its dental office. An electronic medical record would allow improved standardization of the dental chart, allow for ongoing quality improvement audits, and provide population-based management for our dental patients
2010E-0006	HealthReach Community Health Centers 10 Water Street, Suite 305 Waterville, ME 04901	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2010E-0007	Kennebec Valley Dental Coalition, Inc d/b/a Community Dental Center 93 Main Street Waterville, ME 04901	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved
2011F-0005	Kennebec Valley Dental Coalition, Inc d/b/a Community Dental Center 93 Main Street Waterville, ME 04901	\$33,492 00	\$33,492 00	\$0 00	X				The project involves the purchase and installation of Gendex sensor digital x-ray equipment and the necessary IT to up-grade the support systems required to manage it. It also covers the required staff training
2010E-0008	Penobscot Community Health Center 103 Maine Avenue Bangor, ME 04402	\$5,000 00	\$5,000 00	\$0 00	X				Project will support practice management consulting to the safety net dental practice. The consulting will focus on clinical productivity and financial viability with the intention of ensuring access to care for MeHAF priority populations, with the possibility of increasing access for the underserved
2010CON-0008	Cambridge Concord Associates 4 Brattle Street, Suite 301 Cambridge, MA 02138	\$78,633 17	\$15,000 00	\$0 00				X	Cambridge Concord Associates will provide consulting services for the Oral Health Funders to work towards increasing access to quality oral health care in Maine.
2011CON-0016	Health Research, Inc Riverview Center 150 Broadway, Suite 560 Menands, NY 12204-2719	\$40,000 00	\$15,000 00	\$25,000 00				X	The Center for Health Workforce Studies (the Center) will perform an in-depth study of Maine's oral health workforce. The primary project activity will be oral health workforce surveys of all dentists, dental hygienists, and expanded function dental assistants in Maine
Strengthening Maine's Safety Net - Other									
2008CON-0010	USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P.O. Box 9300 Portland, ME 04104-9300	\$142,584 00	\$25,000.00	\$0 00	X				Muskie will assist members of the Maine Critical Access Hospital Patient Safety Collaborative in the implementation of the hospital medication safety initiatives. Muskie will also provide technical assistance to MeHAF's Medication Assistance grantees
Subtotal: Strengthening Maine's Safety Net Grant (12) & Contract (3) Payments = \$209,963.00									

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
Promoting Patient-Centered Care - Integration Initiative									
2008C-0033	Acadia Hospital 268 Stillwater Ave P O Box 422 Bangor, ME 04402-0422	\$300,000 00	\$100,000 00	\$0 00	X				Acadia Hospital will aim to improve patient-centered integrated care in its nine county service area by providing primary medical care services in an existing behavioral health/addiction treatment specialty care setting. It seeks to improve interagency collaboration around persons with the highest health and behavioral health risk status through regular meetings of an advisory board made up of key personnel from large providers of health and behavioral health care in the Bangor region. It seeks to incorporate principles of the Patient Centered Primary Care Collaborative 'Medical Home' into the development of services at Acadia Hospital, and if indicated, suggest enhancement to the medical home concept when the medical home exists in behavioral health/addiction specialty setting. Finally, it seeks to enhance our understanding of the characteristics of patients that are most effectively served through a medical home located in a behavioral health/addiction specialty setting.
2008C-0005	Downeast Health Services, Inc 52 Christian Ridge Road Ellsworth, ME 04605	\$300,000 00	\$100,000 00	\$0 00	X				Downeast Health Services is partnering with the Community Caring Collaborative, Washington County Children's Program and Family First, to offer early intervention services for high risk infants 0-5/young children and their families through embedding trained Infant and Family Support Specialists in two rural health centers and one treatment center. This project will integrate services for this high risk underserved population using EBP wraparound process to create a single shared care plan that is culturally competent and family driven and strengths based in an expanded public health model.
2009B-0005	Eastern Maine Medical Center 489 State Street Bangor, ME 04401	\$220,770 00	\$70,810 00	\$69,960 00	X				EMMC Center for Family Medicine (CFM) will implement a clinical services project. The proposed Screening, Brief Intervention, and Referral for Treatment (SBIRT) model will strengthen integration of behavioral and mental health care services within the CFM. EMMC Family Medicine Residency Program is within in the Center for Family Medicine, and the training of residents will ensure that future Primary Care Physicians are well versed in integrated health care services.
2008C-0003	Franklin Memorial Hospital 111 Franklin Health Commons Farmington, ME 04938	\$299,047 00	\$99,047 00	\$0 00	X				Evergreen Child Development Center's integration program will implement a comprehensive medical model of care utilizing the 'medical home,' the primary care provider, as the gatekeeper for services focused on children in the community with pervasive developmental disorders. The program will include specialized training concerning pre-screening by pediatricians for developmental issues in children and have a direct link through team case reviews and coordinated case records with specialized providers--psychiatrist and developmental/behavioral pediatricians--for follow-up treatment. Parents of children with these chronic issues will develop treatment plans together with specialists and primary care providers focused on the unique needs of their child.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009B-0006	HealthReach Community Health Centers 10 Water Street, Suite 305 Waterville, ME 04901	\$230,000.00	\$75,000 00	\$75,000 00	X				HealthReach will implement the HealthReach Integrated Behavioral Health Initiative (HIBHI) within 6 of 11 Federally Qualified Health Centers (FQHCs). As integrated members of the FQHC teams, the new Behavioral Health Consultants (BHC) will provide assessments and short term interventions to patients receiving primary care services. HealthReach provides medical and preventive services to patients of all ages in medically underserved rural areas. The HIBHI fits well into our overall plan of increasing focus on patient and family.
2011F1-0004	Maine Association of Nonprofits 565 Congress Street, Suite 301 Portland, ME 04101	\$17,500 00	\$17,500 00	\$0 00	X				The Maine Nonprofit Effectiveness Program was designed in response to needs expressed by Maine nonprofits for assistance in navigating the volatile economic climate that emerged after the economic downturn in 2008. MeHAF funding will support the participation of 10 behavioral health organizations in a process that will help to build stronger internal and collaborative operational foundations, as well as support a year-long learning community and consist of the participating organizations and other strategic partners to help support them as they navigate the new federal and state health care payment and delivery system reforms being implemented.
2011F1-0005	Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	\$5,000 00	\$5,000 00	\$0 00	X				Maine Primary Care Association will partner with MeHAF to work on integrated behavioral health/primary care in FQHCs.
2008C-0014	Maine Quality Counts 30 Association Drive P O Box 190 Manchester, ME 04351	\$299,362 00	\$99,985 00	\$0 00	X				The Maine Quality Forum, Quality Counts, and the Maine Health Management Coalition will lead a multi-stakeholder effort to develop, implement, and evaluate a Maine multi-payer pilot of the patient-centered medical home (PCMH) model as a means for transforming health care and improving integration of care across providers, and across settings of care. Implementation of the PCMH model requires both practice transformation and payment reform needed to achieve system transformation to improve care for all Maine people. Maine Quality Counts will convene and coordinate the pilot, including convening payers to implement a new payment methodology, to include patients and families in the implementation of the new model, to support pilot practices in practice transformation, and to ensure integration of behavioral and physical health needs in the PCMH model.
2009B-0013	Maine Quality Counts 30 Association Drive P O Box 190 Manchester, ME 04351	\$229,955 00	\$77,039 00	\$76,129 00	X				Maine Quality Counts will create a Behavioral Health Integration (BHI) Metrics System to promote and sustain integration by providing data to guide appropriate, service delivery enhancements, public policy decisions, payment reforms, and consumer choice of healthcare setting and provider. We will harness the organizational participation, time commitment, resources, and leadership from our partners in behavioral and physical health practices, government entities, and advocacy organizations to develop a statewide infrastructure for data collection, analysis, and reporting. By employing collaborative workgroups we will refine and deploy a set of metrics to measure patient satisfaction, patient outcomes, provider satisfaction, site demographics, and return on investment. Metrics will be aligned with national trends and best practices. Comparative data from integrated and non-integrated practices will be analyzed and distributed back to participating provider practices.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009B-0012	Mercy Hospital 144 State St Portland, ME 04101	\$230,000 00	\$85,000 00	\$65,000 00	X				Mercy Health System, in partnership with Community Counseling Center (CCC) and other key collaborators, will implement an integrated clinical services Patient-Centered Care Management (P-CCM) pilot program. The goal is to apply a patient and family-centered, primary care approach to a target population of adults with dual diagnoses (chronic behavioral/mental illness and chronic disease). Many of these individuals utilize Emergency Room services as their chief source for health care treatment and may also be at a disadvantage due to Limited English Proficiency skills. Building on the integrated strengths of Mercy, CCC, Community Dental, and Amistad as a way to take advantage of each organization's resources, we will employ a Patient Care Navigator (PCN) as part of an Integrated Care Management Team.
2008C-0013	Rosscare Nursing Home, Inc. 43 Whiting Hill Road, Ste 500 Brewer, ME 04412	\$297,426 00	\$98,583 00	\$0 00	X				This program will integrate primary, behavioral, and mental health services for geriatric patients residing in four project partner nursing homes: Ross Manor, Stillwater Healthcare, Colonial Healthcare, and Dexter Healthcare. The grant concept includes hiring a LCSW to function as a mental health transitional support expert working with elderly patients at EMMC and transitioning them to the nursing facility settings and further treatment plan collaboration with the primary care physician and nursing facility staff. The LCSW will provide ongoing training and support. On-site psychiatric nurse practitioner services and telemedicine linkage with Acadia hospital to further strengthen primary care of these patients will be added in year two. Throughout the three years, intensive education will be provided on behavioral health issues targeted at physicians, nurses, and nursing assistants intended to strengthen their skill sets for sustainability.
2008C-0017	Spring Harbor Hospital 123 Andover Road Westbrook, ME 04092	\$294,753 00	\$99,883 00	\$0 00	X				Spring Harbor will build on and advance the work of MaineHealth's Mental Health Integration Program by adapting and piloting the Massachusetts Child Psychiatry Access Project (CPAP) in two geographically disparate Maine counties. CPAP is a family and patient-centered collaborative care model that uses primary care as the point of entry to mental health care. A CPAP team consisting of a child psychiatrist, clinical care coordinator, and social worker assist primary care providers to diagnose and treat children and adolescents with mental health conditions, linking them with needed local resources. Data will be collected and shared in order to develop a plan to sustain and spread the model in Maine.
2008C-0016	St Andrews Hospital & Healthcare Center 6 St Andrews Lane P O Box 417 Boothbay Harbor, ME 04538	\$299,618 00	\$99,996 00	\$0 00	X				St Andrews will conduct a demonstration project that will examine the feasibility and impact of making comprehensive, integrated medical and behavioral health care available to low-income uninsured adults < age 65 in Lincoln County. Using the successful CarePartners model as our framework, we will systematically reach out to and engage virtually all low income adults (up to 500 individuals annually) who are at or below 200% of the Federal Poverty Level and are cared for by health and mental health providers in Lincoln County. Claims and other data on health care utilization will be used to assess the impact of managing care for the target population and findings will be widely disseminated.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2009B-0015	State of Maine, DHHS, Maine Center for Disease Control and Prevention 286 Water Street - Key Plaza, 9th Floor Augusta, ME 04333	\$229,999 00	\$85,000 00	\$65,000 00			X		This project will advance changes at the systems, rather than the health practice or patient level, to integrate public health and mental health programs and planning to improve the health of all Mainers. These systems have been largely isolated from one another, with separate target populations, policy development, infrastructure, funding streams, and programming. The initiative will fill gaps in knowledge about population-based mental health indicators, use mental health data to inform community public health efforts, and support linkages between community-based prevention/health promotion partners and community mental health systems. The proposal will expand the integration of mental health into chronic disease programming as a critical next step in the development of full integration of mental health into essential public health activities.
2008C-0027	State of Maine, DHHS, Office of Quality Improvement 221 State Street Augusta, ME 04333	\$299,985 00	\$100,000 00	\$0 00			X		This project seeks at the state provider and consumer level to develop systems to support linkage of persons with SMI to a welcoming medical home that provides preventive and high-quality planned care for chronic conditions to pilot systems for integrating health issues into existing competencies and workflow in the public mental health system, and to coordinate mental health/healthcare management services for a vulnerable population. This approach will promote integration of health and mental health in infrastructure policy and planning for Maine's mental health system.
2008C-0008	Tri-County Mental Health Services 1155 Lisbon Street P O Box 2008 Lewiston, ME 04241-2008	\$300,000 00	\$100,000 00	\$0 00	X				This project will integrate primary care with behavioral health care in Northern Oxford County through contractual relationships between Tri-County Mental Health Services and Rumford Community Family Health Center, DBA Swift River Health Care. It will expand access to care by removing barriers, increase treatment capacity, knowledge base among diverse providers, and engage consumers in education and project development and feedback.
2009B-0016	Tri-County Mental Health Services 1155 Lisbon Street P O Box 2008 Lewiston, ME 04241-2008	\$230,000 00	\$78,000 00	\$72,000 00	X				This Integrated Health Care project will increase access to behavioral health care services provided by Tri-County Mental Health Services to people of all ages in the Bridgton region who are patients of Bridgton Hospital Physicians Group's multiple practices. The project will embed mental health clinicians in the practices to provide brief, solution-oriented behavioral health treatment, streamlined referrals for other TCMHS services offered in the community, provide information and education about behavioral health issues for staff of Bridgton Hospital Physician's Group, and create an integrated record for patients seen in the primary care setting.
2010CON-0004	John Snow, Inc (JSI) 44 Farnsworth Street Boston, MA 02210-1211	\$197,560 00	\$47,560 00	\$0 00				X	JSI will conduct an evaluation of MeHAF's Integration Initiative. The majority of tasks in year 2 are continuations of the year 1 work, including, plan for and conduct site visits; attend quarterly grantee meetings, conduct telephone interviews of sites not visited, provide technical assistance, conduct data analysis, and write year 2 report. Other tasks for year 2 include the following: (1) collect CDE and SSA data, (2) develop project data manual, (3) provide support to content of quarterly grantee meetings, (4) assess patient perceptions/satisfaction; and (4) conduct data analysis and develop case studies.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011CON-0004	John Snow, Inc (JSI) 44 Farnsworth Street Boston, MA 02210-1211	\$198,816 00	\$150,000 00	\$48,816 00				X	JSI will continue the cross-site evaluation of the Integration Initiative (year three)
Promoting Patient-Centered Care - Integrated Care Training Academy									
2011A-0007	MaineHealth 110 Free Street Portland, ME 04101	\$5,000 00	\$5,000 00	\$0 00	X				MaineHealth's Mental Health Integration (MHI) program will provide consultative technical assistance to primary and specialty health care teams who are interested in increasing their level of integration and collaboration with mental health providers. The MHI team will provide consultative technical assistance for up to 10 practices throughout Maine over a one year period
2011E-0004	Mercy Hospital 144 State St Portland, ME 04101	\$5,000 00	\$5,000 00	\$0 00	X				Mercy Hospital has developed a Patient/Peer Care Navigator model as its approach to integrating primary care and behavioral health in a hospital based primary care setting. Mercy Hospital is looking to develop the business case and financial forecasting to show how this model can be expanded and sustained as a viable model for integration and care coordination. Our goal is to develop a business case for the Patient/Peer Care Navigation Program in today's healthcare system, and in the emerging future healthcare systems proposed, including accountable care organizations
2011A-0003	NAMI-Maine 1 Bangor Street Augusta, ME 04330	\$5,000 00	\$5,000 00	\$0 00	X				NAMI Maine, Amistad, and Alpha One will use a three step model to improve how integrated clinical sites assure that the care they provide is patient and family centered. The project will advance the field of knowledge about how to meaningfully engage patients and families. Three health care practices will measure existing practice, build an action plan for change, and measure outcomes that result from that change. Using evidence-based assessment tools, selected sites will improve how effectively they engage patients and families and the current status of their patient centered care delivery. All partners in this project will also collaborate to demonstrate to the larger field of integrated practice how this simple method can establish meaningful patient and family involvement and improve outcomes
2011E-0006	Rosscare Nursing Home, Inc 43 Whiting Hill Road, Ste 500 Brewer, ME 04412	\$5,000 00	\$5,000 00	\$0 00	X				Rosscare Nursing Home Inc (RNHI) will convene a group of nursing home and hospital financial specialists to complete a financial impact study for the Northeast Integrated Geriatrics Care (NEIG) pilot program. The analysis will focus on the pilot program's incremental costs, savings, and other financial outcomes and will provide a blueprint for others interested in implementing a similar program. The completed report will form the business plan anticipated to sustain the current program

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2011E-0007	Tri-County Mental Health Services 1155 Lisbon Street P O Box 2008 Lewiston, ME 04241-2008	\$5,000 00	\$5,000 00	\$0 00	X				TCMHS has a successful, sustainable, and replicable model for Integrated Primary Care, and nearly three years of experience making it work in multiple sites. TCMHS will provide consultative technical assistance to other organizations to advance the field of Integrated Primary Care
2011A-0001	USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy 34 Bedford Street P O Box 9300 Portland, ME 04104-9300	\$5,000 00	\$5,000 00	\$0 00	X				The Muskie School at the University of Southern Maine will implement a health screen in three-community based mental health agencies. The project will leverage funds from a Cooperative Agreement Muskie has with DHHS to design, develop, and disseminate the health screen toolkit
Promoting Patient-Centered Care - Health Information Technology									
2010FI-0009	Daniel Hanley Center for Health Leadership PO Box 15275 Portland, ME 04112	\$38,640 00	\$38,640 00	\$0 00	X				Hanley Center will manage an intensive 12-month process designed to accelerate collaboration on electronic clinical information systems among behavioral health providers across Maine through the development of a fully-integrated clinical information-sharing plan. The planning process will include a one-day forum for behavioral health leaders and others, followed by six half-day work sessions
Subtotal, Promoting Patient-Centered Care Grant (24) & Contract (2) Payments = \$1,657,043.00									
Other Funding - Fund for the Future									
2009D-0001	AOS 93 767 Main St Damariscotta, ME 04543	\$49,473 00	\$24,914 00	\$0 00	X				AOS No. 93 will expand the current work of the grassroots organization Focus on Agriculture in Rural Maine Schools (FARMS). FARMS goals are to expand their work to bring local foods and farms into the schools by creating a FARMS to School Coordinator position to create "food learning centers," within the classroom and school cafeterias. Additionally, FARMS seeks to change the culture of student food choice behaviors through educating AOS #93's 1625 students about healthy choices
2009D-0002	Child and Family Opportunities P O Box 648 Ellsworth, ME 04605	\$50,000 00	\$25,000 00	\$0 00	X				Good Food Community Based Support for Healthy Eating, a project in Sedgwick Maine, will make healthy eating easier, fun, and socially normative. Focusing on education alone is not sufficient. Thus, this project will combine education with economic, social, and environmental support

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2010A-0004	People's Regional Opportunity Program/The Opportunity Alliance 510 Cumberland Avenue Portland, ME 04101	\$50,000 00	\$25,000 00	\$0 00	X				In order to reduce and prevent underage substance abuse in the West End of South Portland, this community-based, collaborative effort will engage organizations and community members--including youth--in working towards a healthier community. We will take a multi-pronged approach to prevention by addressing access to substances, providing education and resources, and engaging youth in meaningful, positive activities. By building and strengthening relationships within the West End, engaging and supporting youth, and building upon existing resources and capacity, the project will reduce youth substance use and improve overall health throughout the communities of the West End.
2009D-0005	Rangeley Lakes Heritage Trust 52 Carry Road P O Box 249 Oquossoc, ME 04964	\$50,000 00	\$25,000 00	\$0 00	X				EcoVenture and partner Rangeley Region Health and Wellness Partnership (RRHWP) will implement an expanded version of EcoVenture's award-winning program to address childhood obesity in Rangeley. Collaborating with RRHWP, the EcoVenture program will increase the physical activity of its campers and provide nutritional education by expanding the program's length, scope of activities and number of campers. Designed to dovetail with the Rangeley Lakes Regional School's (RLRS) team-based "Fit 'N Fun" program, and based loosely on the Rangeley's "Biggest Loser" contest sponsored by RRHWP, the program will insure that health-based progress made by children during the school year are retained or improved while attending EcoVenture.
2010A-0006	Town of Bucksport, Maine P O Drawer X Bucksport, ME 04416	\$50,000 00	\$25,000 00	\$0 00			X		The proposed Community Wellness Guide Program will train community gatekeepers including teachers, ministers, day care providers, business owners, municipal personnel, and community organization volunteers in understanding their unique role in promoting wellness. The coalition views participation by these non-traditional partners as the most effective means to improving the cardiovascular health of local citizens. A structured training program will be provided for wellness guides. This training program will provide an ongoing framework and requisite skills which will guide them in contributing time and resources to promoting health messages and programs for their respective contingencies.
Subtotal, Other Funding -- Fund for the Future Grant (5) Payments = \$124,914.00									

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
Other Funding - Discretionary Grants & Meeting Support									
2011DIS-0002	City of Lewiston Lewiston City Hall - Administrator's Office 27 Pine Street Lewiston, ME 04240	\$1,000 00	\$1,000 00	\$0 00			X		The forum will be held at the local Bates College & will convene professionals in health care, schools, residential properties, legal support services & social service agencies to learn about the identification and eradication of bedbugs, bedbug management legal issues, policy development, working with vulnerable populations, & ways to minimize infestations
2011DIS-0017	Daniel Hanley Center for Health Leadership PO Box 15275 Portland, ME 04112	\$10,000 00	\$10,000 00	\$0 00	X				Author and NPR commentator T R Reid will spend an entire week in Maine delivering nearly a dozen presentations designed to show how employers and health care providers are working together to improve quality and expand access to coverage in the U.S. and around the globe
2011DIS-0009	Eastern Maine Development Corporation 40 Harlow Street Bangor, ME 04401	\$2,000 00	\$2,000 00	\$0 00	X				Eastern Maine Development Corp will convene more than 35 health and service organizations (economic development, social services, and other non-profit organizations) from this region to support potential collaborations for funding that promotes livable communities. Participants will meet their counterparts, pool resources, and build partnerships for competitive applications that benefit a broad population
2011DIS-0019	Environmental Health Strategy Center PO Box 2217 Bangor, ME 04402	\$1,000 00	\$1,000 00	\$0 00	X				This event will bring together 200 medical practitioners, public health policy makers, children's and health advocates, and others to explore contributions of chemical exposures from everyday products to childhood obesity and diabetes, and develop action strategies. The conference will initiate ongoing collaboration and action
2011DIS-0013	Family Medicine Education Consortium Inc c/o MDFMR 15 E Chestnut St Augusta, ME 04330	\$1,000 00	\$1,000 00	\$0 00	X				The FMEC conference is the second-largest gathering of medical students interested in family medicine in the country. This proposal seeks to strengthen the commitment of two Maine medical students to enter family medicine in Maine for residency and beyond, by sponsoring their attendance at the FMEC regional conference
2011DIS-0021	Franklin Memorial Hospital 111 Franklin Health Commons Farmington, ME 04938	\$5,000 00	\$5,000 00	\$0 00	X				This project will evaluate the relevance of the 4Ps Plus protocol to screen for prenatal drug and alcohol use in a rural community setting. This is a pilot project to determine the usefulness of the screening tool prior to its implementation on a statewide basis
2011DIS-0016	Hand in Hand / Mano en Mano P O Box 573 Milbridge, ME 04658	\$4,000 00	\$4,000 00	\$0 00	X				Mano en Mano seeks funding to conduct a community needs assessment of at least 80 families living in Milbridge and surrounding towns. This survey will shape our next strategic plan and focus on education, access to healthcare and other essential social services, affordable housing, employment opportunities, program effectiveness, and basic demographics

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst.	Govt. Entity	Other	Project Description
2011DIS-0010	LifeFlight of Maine 13 Main Street P O Box 899 Camden, ME 04843	\$10,000 00	\$10,000 00	\$0 00	X				Each year thousands of Maine children suffer from life threatening illness and injury LifeFlight proposes to train dozens of first-responders and EMTs from across the state using life-like manikins We will teach best practices and teamwork when caring for children
2011DIS-0003	Maine Long-Term Care Ombudsman Program One Weston Court PO Box 128 Augusta, ME 04332	\$9,980 00	\$9,980 00	\$0 00	X				This project will provide an opportunity for the MLTCOP to host six listening sessions across the state to assess the needs of long term care consumers, their understanding of and access to services, the gaps in service provision and their recommendations for service delivery to meet their needs
2011DIS-0015	Maine Medical Center 22 Bramhall St Portland, ME 04102-3175	\$2,000 00	\$2,000 00	\$0 00	X				Conference goals are two fold, one to present the business case of how employee depression impacts health care costs, productivity and absenteeism, and to provide employers with resources for educating employees about depression, tools for depression screenings, benefit design, community support and worksite wellness initiatives
2011DIS-0018	Maine Public Health Association 11 Parkwood Avenue Augusta, ME 04330	\$1,000 00	\$1,000 00	\$0 00	X				This conference will provide an opportunity for public health and primary care professionals in Maine to hear from a panel comprised of experts as we acknowledge the successes from the past decade and identify challenges that must be addressed in the next ten years
2011DIS-0006	Maine Quality Counts 30 Association Drive P O Box 190 Manchester, ME 04351	\$2,000 00	\$2,000 00	\$0 00	X				QC2011 conference offers participants tools for collaboration within communities to improve healthcare and provides opportunities to learn from experts about best practices to deliver high value, patient-centered care Focus will be on collaboration and using medical neighborhoods to link patients with providers, hospitals, and community partners
2011DIS-0012	Maine Quality Counts 30 Association Drive P O Box 190 Manchester, ME 04351	\$10,000 00	\$10,000 00	\$0 00	X				Maine Quality Counts, collaborating with Quality Partners of RI, is developing a Maine based application to CMS to become the state's Medicare Quality Improvement Organization The newly formed Maine Quality Partners organization will use their collective insight and expertise to strengthen health care quality improvement efforts for ME Medicare beneficiaries and residents
2011DIS-0011	Maine-Dartmouth Family Medicine Residency 15 E Chestnut Street Augusta, ME 04330	\$1,835 50	\$1,835 50	\$0 00	X				MDFMR will record and broadcast via webinar, as well as archive the Scholarship in Medicine Distinguished Speaker Series The lecture series features prominent health care providers, scientists and policy makers The series explores the stories behind what we do on a daily basis in clinic
2011DIS-0007	MaineGeneral Health And Affiliates 6 E Chestnut St Augusta, ME 04330-5717	\$2,000 00	\$2,000 00	\$0 00	X				The project, Exercise, Executive Function and Excellence, utilizes current neuroscience research providing empirically-based support to biological benefits of exercise to brain structure, function and chemistry in improving thinking skills, enhancing attention, concentration and memory, relieving depression, as well as promoting overall general health

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011DIS-0005	Mainely Girls 10 Summer Street P O Box 793 Rockport, ME 04856	\$1,000 00	\$1,000 00	\$0 00	X				Dr. Susan Ice, Medical Director of Renfrew Eating Disorders Center will give the keynote at the "Team Treatment of Eating Disorders Beyond the Basics," conference in Freeport and a two-hour workshop at Maine's Chapter of the American Association of Pediatrics' conference, "Adolescent Medicine," in Bar Harbor
2011DIS-0008	Medical Care Development 11 Parkwood Drive Augusta, ME 04330	\$4,958 91	\$4,958 91	\$0 00	X				Maine Senior Driver Coalition will partner with Maine Medical Association to translate national best practices and standards of care from the AMA Physician's Guide to Assessing and Counseling Older Drivers, for usability by practicing physicians and develop a curriculum for use in Grand Rounds, Academic Detailing visits, and comparable opportunities
2011DIS-0020	Medical Care Development 11 Parkwood Drive Augusta, ME 04330	\$8,900 00	\$8,900 00	\$0 00	X				The Maine Dental Access Coalition (MDAC) is seeking to secure its future as an independent, vibrant and effective oral health coalition. We will institute a new governance structure and develop a strategic plan that addresses governance and membership options, direct fundraising, corporate and foundation support, and revenue generating activities
2011DIS-0004	Penobscot Community Health Center 103 Maine Avenue Bangor, ME 04402	\$8,750 00	\$8,750 00	\$0 00	X				The purpose of this research project is to increase the richness of the current PCHC Capehart Health Center evaluation. The goal is to answer the following primary question: Will clients at the Capehart Health Center who receive physical health care differ from those clients that receive both physical and mental health care?
Subtotal, Other Funding - Discretionary Grant and Meeting Support (19) Payments = \$86,424.41									
Other Funding - Charitable Gifts									
2011CGF-0003	Maine Center for Economic Policy 66 Winthrop Street P O Box 437 Augusta, ME 04332	\$10,000 00	\$10,000 00	\$0 00	X				Charitable gift to MeCEP's Legacy Project
2011CGF-0009	Maine Center for Economic Policy 66 Winthrop Street P O Box 437 Augusta, ME 04332	\$50 00	\$50 00	\$0 00	X				General Support

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14 Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011CGF-0002	Maine Initiatives 295 Water Street, Suite 100 P O Box 2248 Augusta, ME 04338	\$5,000 00	\$5,000 00	\$0 00	X				MEHAF sponsorship of the 2011 Watering Can Awards Dinner (lead sponsor)
2011CGF-0010	Maine Medical Education Trust 30 Association Drive P O Box 190 Manchester, ME 04351	\$200 00	\$200 00	\$0 00	X				General Support
2011CGF-0005	Maine Philanthropy Center USM Glickman Family Library P O Box 9301 Portland, ME 04104-9301	\$5,000 00	\$5,000 00	\$0 00	X				MPC, with the Alliance for Justice (AFJ), will host a day-long program which will include a morning session for grantmakers and trustees around the rules and regulations of engaging in policy work and the reasons why it should be an important part of a foundation's work. An afternoon session will be offered in partnership with the Maine Association of Nonprofits (MANP) for nonprofit leadership engaged in policy work. This is a higher level learning session to advance capacity in the sector.
2011CGF-0001	Maine Women's Fund 565A Congress Street, Suite 306 P O Box 5135 Portland, ME 04101	\$1,000 00	\$1,000 00	\$0 00	X				Sponsorship for 2011 Maine Women's Fund Leadership Luncheon - Women's Creativity Shaping the Future of Maine
2011CGF-0006	MaineGeneral Medical Center 6 East Chestnut Street Augusta, ME 04330	\$500 00	\$500 00	\$0 00	X				General Support
2011CGF-0007	Natural Resources Council of Maine, Inc 3 Wade St Augusta, ME 04330	\$750 00	\$750 00	\$0 00	X				General Support

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2011

01-0535144

Ref. #	Organization	Total Amount for Grant or Contract	Amount Paid in 2011	Ending Balance 2011	Public Charity	Educational Inst	Govt. Entity	Other	Project Description
2011CGF-0008	Planned Parenthood of Northern New England 183 Talcott Road, Ste 101 Williston, VT 05495	\$100 00	\$100 00	\$0 00	X				General Support
2011CGF-0004	University of Southern Maine, University Libraries P O Box 9301 Portland, ME 04104-9301	\$750 00	\$750 00	\$0 00	X				Charitable gift in recognition of Howard M Solomon, 2011 recipient of the Sampson Center for Diversity Catalyst for Change Award
Subtotal, Charitable Gifts (10) = \$23,350.00									

Total Grants Paid in 2011 (85)	\$3,042,348 35
Total Contracts Paid in 2011 (7)	\$300,003 00
Total Charitable Gifts in 2011 (10)	\$23,350 00
Total Payments in 2011	\$3,365,701 35
Total New Grant Awards (Newly allocated in 2011) = 57 grants = \$1,481,241.35	

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 15
Year Ended December 31, 2011

01-0535144

Part XV, Line 2: Information Regarding Grant Programs

Line 2a: Grant applications should be addressed to:

Catherine Luce, Grants Manager
Maine Health Access Foundation
150 Capitol Street, Suite 4
Augusta, Maine 04330
email: cluce@mehaf.org
Phone: (207) 620-8266; ext 104

Questions about specific funding opportunities can be directed to individual program staff, who are listed in each request for proposals (RFP) and on the web site.

Line 2b: In 2010, the foundation initiated a comprehensive nine-month strategic planning process to guide MeHAF's grant and program activities for the next five years (2011-2016). This planning process included engaging the services of consultants with national philanthropic strategic planning expertise who conducted internal and external stakeholder interviews, environmental assessments that evaluated the demographic, social and economic landscape of Maine, and research of best practices and innovative program approaches advanced by both public and private organizations in Maine and across the nation. All this information guided the development of specific program strategies for MeHAF moving forward.

The strategic planning process concluded in April 2011 with Board approval of four new strategic priorities that will serve as the focus for our major grant and program funding over the next five years. This work will build on a solid foundation of current innovative, evidence based practices with the aim of spreading rapid adoption and implementation of successful models that can expand access, improve quality, contain costs, and bridge the divide between clinical settings and communities where people live, work and play. Executing the specific program goals for each priority will require long term partnerships with our grantees, other key stakeholders and people in Maine communities we're committed to serve, and may necessitate additional staff resources with new expertise to be successful. MeHAF's four new strategic priorities are listed on our website at www.mehaf.org. MeHAF provides explicit guidance for the submission of grant applications on its website. Current information about MeHAF's grant programs is available at www.mehaf.org under the section marked "Grants."

In 2011, MeHAF issued several Request for Proposals (RFP) for the strategic priorities: *Strengthening Maine's Safety Net*; *Promoting Patient & Family Centered Care*; and *Advancing Health Reform*. Information regarding MeHAF's funding priorities and grant opportunities, including all RFPs, are available on the MeHAF website. All RFPs are publicized via MeHAF's e-mail newsletter, *AccessPoints*. Each RFP provides explicit information on the submission requirements, application forms and other relevant project materials for major strategic programs and policy grants. All open competitive grants rounds were submitted via online application forms.

Line 2c:

All submission deadlines are outlined in the Foundation's requests for proposals available through the website: www.mehaf.org. In addition to RFP solicitations, MeHAF offers open funding opportunities

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 15

Year Ended December 31, 2011

01-0535144

through the discretionary grants programs and foundation-initiated (invited) grants. In 2011, MeHAF also provided some renewal funding opportunities to grantees to continue projects. Guidance is available on the MeHAF website.

Line 2d: MeHAF generally limits its grant awards offered through competitive RFPs to 501(c)(3) tax-exempt charitable organizations, educational institutions, governmental entities or other public, non-profit entities. Private foundations, individuals, fiscal sponsorships and organizations with pending non-profit status are generally ineligible to receive funding through the competitive RFP process. MeHAF primarily funds Maine-based organizations; however, qualified organizations from outside the state may apply for funding if the project activities focus on Maine's health care system or Maine residents.

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 16

01-0535144
12/31/2011

PART I, LINE 19 & PART II, LINE 14

	<u>COST</u>	<u>DEPREC.</u>	<u>A/D</u>
FURNITURE & EQUIPMENT	<u>227,469</u>	<u>17,064</u>	<u>207,655</u>

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

► **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box ☒ **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only ☐

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print File by the due date for filing your return. See instructions	Name of exempt organization or other filer, see instructions. MAINE HEALTH ACCESS FOUNDATION, INC.	Employer identification number (EIN) or ☒ 01-0535144
	Number, street, and room or suite no. If a P.O. box, see instructions. 150 CAPITOL STREET, No. 4	Social security number (SSN) ☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. AUGUSTA, ME 04330	

Enter the Return code for the return that this application is for (file a separate application for each return)

Application Is For	Return Code	Application Is For	Return Code
Form 990	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

WENDY J. WOLF, M.D., M.P.H.

- The books are in the care of ► **150 CAPITOL STREET, SUITE 4 - AUGUSTA, ME 04330**
Telephone No. ► **(207) 620-8266** FAX No. ► **(207) 620-8269**

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐ . If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

- 1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **August 15, 2012**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
► ☒ calendar year **2011** or
► ☐ tax year beginning , and ending

- 2 If the tax year entered in line 1 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	229,855.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	129,855.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	100,000.

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Form 8868 (Rev. 1-2012)

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**
- Note.** Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Enter filer's identifying number, see instructions

Type or print File by the due date for filing your return. See instructions.	Name of exempt organization or other filer, see instructions	Employer identification number (EIN) or
	Maine Health Access Foundation, Inc.	☒ 01-0535144
	Number, street, and room or suite no. If a P.O. box, see instructions.	Social security number (SSN)
	150 Capitol Street, No. 4	☐
	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	
	Augusta, ME 04330	

Enter the Return code for the return that this application is for (file a separate application for each return) ...

Application Is For	Return Code	Application Is For	Return Code
Form 990	01		
Form 990-BL	02	Form 1041-A	08
Form 990-EZ	01	Form 4720	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

Wendy J. Wolf, M.D., M.P.H.

- The books are in the care of ☒ 150 Capitol Street, Suite 4 - Augusta, ME 04330
- Telephone No. ☒ (207) 620-8266 FAX No. ☒ (207) 620-8269

- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) . If this is for the whole group, check this box ☐. If it is for part of the group, check this box ☐ and attach a list with the names and EINs of all members the extension is for.

4 I request an additional 3-month extension of time until November 15, 2012.5 For calendar year 2011, or other tax year beginning , and ending .6 If the tax year entered in line 5 is for less than 12 months, check reason: ☐ Initial return ☐ Final return
☐ Change in accounting period

7 State in detail why you need the extension

Additional time is needed to gather the information necessary to prepare a complete and accurate return.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	8a	\$	229,855.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868.	8b	\$	229,855.
c Balance due. Subtract line 8b from line 8a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	8c	\$	0.

Signature and Verification must be completed for Part II only.

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form

Signature ☒ Wendy J. Wolf Title ☒ CPADate ☒ 8/6/12

Form 8868 (Rev. 1-2012)