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Form 990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

Do not enter Social Security numbers on this form as it may be made public

Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2013

Open to Public Inspection

For calendar year 2013 or tax year beginning

, and ending

Name of foundation

Maine Health Access Foundation, Inc.

Number and street (or P O box number if mail is not delivered to street address)

150 Capitol Street

Room/suite

4

A Employer identification number

01-0535144

B Telephone number

(207) 620-8266

City or town, state or province, country, and ZIP or foreign postal code

Augusta, ME 04330

C If exemption application is pending, check here ☐D 1. Foreign organizations, check here ☐2. Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

Check all that apply

☐

Initial return

☐

Initial return of a former public charity

☐

Final return

☐

Amended return

☐

Address change

☐

Name change

H Check type of organization

☒

Section 501(c)(3) exempt private foundation

☐ Section 4947(a)(1) nonexempt charitable trust☐

Other taxable private foundation

Fair market value of all assets at end of year

(from Part II, col (c), line 16)

\$ 124,581,299.

J Accounting method

☐

Cash

☒

Accrual

☐ Other (specify)

(Part I, column (d) must be on cash basis)

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)

Revenue

Operating and Administrative Expenses

1	Contributions, gifts, grants, etc., received	6,000.		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	1,931,180.	1,893,593.		
5a	Gross rents				
b	Net rental income or (loss)				
6a	Net gain or (loss) from sale of assets not on line 10	12,383,797.			
b	Gross sales price for all assets on line 6a				
7	Capital gain net income (from Part IV, line 2)		12,383,797.		
8	Net short-term capital gain				
9	Income modifications			30,146.	
10a	Gross sales less returns and allowances				
b	Less: Cost of goods sold				
c	Gross profit or (loss)				
11	Other income	3,225.	<4,507,622.>		Statement 1
12	Total. Add lines 1 through 11	14,331,702.	9,777,268.	30,146.	
13	Compensation of officers, directors, trustees, etc	784,822.	8,000.		776,822.
14	Other employee salaries and wages				
15	Pension plans, employee benefits	143,914.	0.		143,914.
16a	Legal fees Stmt 2	4,526.	0.		4,526.
b	Accounting fees Stmt 3	49,200.	2,000.		47,200.
c	Other professional fees Stmt 4	2,777.	0.		2,777.
17	Interest				
18	Taxes Stmt 5	451,705.	0.		55,693.
19	Depreciation and depletion	17,404.	0.		
20	Occupancy	78,779.	0.		78,779.
21	Travel, conferences, and meetings	67,485.	0.		67,485.
22	Printing and publications	22,560.	0.		22,560.
23	Other expenses Stmt 6	1,212,100.	373,635.		860,296.
24	Total operating and administrative expenses. Add lines 13 through 23	2,835,272.	383,635.		2,060,052.
25	Contributions, gifts, grants paid	4,316,590.			3,417,942.
26	Total expenses and disbursements. Add lines 24 and 25	7,151,862.	383,635.		5,477,994.
27	Subtract line 26 from line 12				
a	Excess of revenue over expenses and disbursements	7,179,840.			
b	Net investment income (if negative, enter -0-)		9,393,633.		
c	Adjusted net income (if negative, enter -0-)			30,146.	

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	61,526.	44,353.	44,353.			
	2 Savings and temporary cash investments	968,398.	11,730,823.	11,730,823.			
	3 Accounts receivable ▶						
	Less allowance for doubtful accounts ▶						
	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	35,143.	42,476.	42,476.			
	10a Investments - US and state government obligations						
	b Investments - corporate stock						
	c Investments - corporate bonds						
	11 Investments - land, buildings, and equipment basis ▶						
Liabilities	Less accumulated depreciation ▶						
	12 Investments - mortgage loans						
	13 Investments - other Stmt 8	111,290,053.	111,966,178.	111,966,178.			
	14 Land, buildings, and equipment basis ▶ 284,052.						
	Less accumulated depreciation ▶ 236,583.	37,570.	47,469.	47,469.			
	15 Other assets (describe ▶ Statement 9)	824,000.	750,000.	750,000.			
	16 Total assets (to be completed by all filers - see the instructions Also, see page 1, item 1)	113,216,690.	124,581,299.	124,581,299.			
	17 Accounts payable and accrued expenses	53,616.	39,118.				
	18 Grants payable	1,046,666.	1,945,314.				
	19 Deferred revenue						
Net Assets or Fund Balances	20 Loans from officers, directors, trustees, and other disqualified persons						
	21 Mortgages and other notes payable						
	22 Other liabilities (describe ▶ Statement 10)	376,000.	592,000.				
	23 Total liabilities (add lines 17 through 22)	1,476,282.	2,576,432.				
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	111,740,408.	122,004,867.				
	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	111,740,408.	122,004,867.				
	31 Total liabilities and net assets/fund balances	113,216,690.	124,581,299.				

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	111,740,408.
2 Enter amount from Part I, line 27a	2	7,179,840.
3 Other increases not included in line 2 (itemize) ▶ See Statement 7	3	3,084,619.
4 Add lines 1, 2, and 3	4	122,004,867.
5 Decreases not included in line 2 (itemize) ▶	5	0.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	122,004,867.

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 Net Gains from Pooled Investments		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			12,383,797.
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69

(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	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
a			12,383,797.
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	12,383,797.
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 the 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))
2012	5,479,772.	108,352,220.	.050574
2011	4,789,226.	107,821,685.	.044418
2010	5,012,253.	101,666,088.	.049301
2009	5,069,341.	92,131,179.	.055023
2008	5,867,395.	111,335,080.	.052700

2 Total of line 1, column (d)	2	.252016
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	.050403
4 Enter the net value of noncharitable-use assets for 2013 from Part X, line 5	4	117,522,363.
5 Multiply line 4 by line 3	5	5,923,480.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	93,936.
7 Add lines 5 and 6	7	6,017,416.
8 Enter qualifying distributions from Part XII, line 4 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	8	5,477,994.

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)			
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☐ and enter 1% of Part I, line 27b		1	187,873.
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)			
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		2	0.
3 Add lines 1 and 2		3	187,873.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)		4	0.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-		5	187,873.
6 Credits/Payments			
a 2013 estimated tax payments and 2012 overpayment credited to 2013	6a	174,282.	
b Exempt foreign organizations - tax withheld at source	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c	150,000.	
d Backup withholding erroneously withheld	6d		
7 Total credits and payments Add lines 6a through 6d	7	324,282.	
8 Enter any penalty for underpayment of estimated tax Check here ☒ if Form 2220 is attached	8	169.	
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	136,240.	
11 Enter the amount of line 10 to be Credited to 2014 estimated tax ☐ 136,240. 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 the 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.		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		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	X	
b If "Yes," has it filed a tax return on Form 990-T for this year?	X	
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T		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?	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	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	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 2013 or the taxable year beginning in 2013 (see instructions for Part XIV)? If "Yes," complete Part XIV		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		X

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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	15	N/A	
16	At any time during calendar year 2013, 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		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 2013?		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 2013, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2013? If "Yes," list the years ►	☐ Yes ☒ No	
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	
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 2013 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 2013.)	N/A	
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		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 2013?		X

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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 ☐**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?☒ 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.

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

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 11		187,000.	19,506.	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	118,358.	16,695.	0.
Becky Hays Boober 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	79,978.	8,136.	0.
Leonard Bartel 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	68,677.	17,811.	0.
Catherine Luce 150 Capitol Street, Augusta, ME 04330	Grant Manager 37.50	62,599.	15,007.	0.
Charles Dwyer 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	64,000.	12,822.	0.
Total number of other employees paid over \$50,000 ☐				3

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services. If none, enter "NONE."

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
Prime Buchholz & Associates 40 Pleasant Street, Portsmouth, NH 03801	Investment advisory	62,419.

Total number of others receiving over \$50,000 for professional services

0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 Various direct charitable activities and contracts. Please see attached statements 6 and 14.	2,060,052.
2	
3	
4	

Part IX-B Summary of Program-Related Investments

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

	Amount
1 N/A	
2	
3 All other program-related investments. See instructions.	
Total. Add lines 1 through 3	0.

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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	119,338,526.
b	Average of monthly cash balances	1b	<26,482.>
c	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	119,312,044.
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	119,312,044.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,789,681.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	117,522,363.
6	Minimum investment return. Enter 5% of line 5	6	5,876,118.

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	5,876,118.
2a	Tax on investment income for 2013 from Part VI, line 5	2a	187,873.
b	Income tax for 2013 (This does not include the tax from Part VI.)	2b	4,735.
c	Add lines 2a and 2b	2c	192,608.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	5,683,510.
4	Recoveries of amounts treated as qualifying distributions	4	30,146.
5	Add lines 3 and 4	5	5,713,656.
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	5,713,656.

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	5,477,994.
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	5,477,994.
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	5,477,994.

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.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2012	(c) 2012	(d) 2013
1 Distributable amount for 2013 from Part XI, line 7				5,713,656.
2 Undistributed income, if any, as of the end of 2013				
a Enter amount for 2012 only			5,092,369.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2013				
a From 2008				
b From 2009				
c From 2010				
d From 2011				
e From 2012				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2013 from Part XII, line 4 ▶ \$ 5,477,994.				
a Applied to 2012, but not more than line 2a			5,092,369.	
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 2013 distributable amount				385,625.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2013 (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 2012 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2013 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2014				5,328,031.
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 2008 not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2014. Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2009				
b Excess from 2010				
c Excess from 2011				
d Excess from 2012				
e Excess from 2013				

N/A

▶

4942(1)(5)

(e) Total

(4) Gross investment income

2013.04010 Maine Health Access Foundat 46280-81

Part XV **Supplementary Information** (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment				
Recipient Name and address (home or business)	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
a Paid during the year				
See statement 14	N/A	See Statement 14	Enhance health care in Maine	3,417,942.
Total			3a	3,417,942.
b Approved for future payment				
See statement 14	N/A	See Statement 14	Enhance health care in Maine	1,945,314.
Total			3b	1,945,314.

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income
	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments						
3 Interest on savings and temporary cash investments			14	7,500.		
4 Dividends and interest from securities	900099	37,587.	14	1,893,593.		
5 Net rental income or (loss) from real estate						
a Debt-financed property						
b Not debt-financed property						
6 Net rental income or (loss) from personal property						
7 Other investment income						
8 Gain or (loss) from sales of assets other than inventory			18	12,383,797.		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue						
a Expense rebates			01	3,225.		
b Net adjustment for						
c investment income on						
d schedules K-1				<4,507,622.>		
e (not recorded on books)				4,507,622.		
12 Subtotal. Add columns (b), (d), and (e)		37,587.		14,288,115.		0.
13 Total. Add line 12, columns (b), (d), and (e)					13	14,325,702.

(See worksheet in line 13 instructions to verify calculations)

Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990

OMB No 1545-0047

2013

Name of the organization

Maine Health Access Foundation, Inc.

Employer identification number

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 its Form 990-PF, Part I, line 2, 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) (2013)

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	Northeast Delta Dental Foundation P.O. Box 2002 Concord, NH 03302-2002	\$ 6,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

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

Part II Noncash Property (see instructions) Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

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
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Description	(a) Revenue Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income
Expense rebates	3,225.	0.	
Net adjustment for investment income on schedules K-1 (not recorded on books)	<4,507,622.> 4,507,622.	<4,507,622.> 0.	
Total to Form 990-PF, Part I, line 11	3,225.	<4,507,622.>	

Form 990-PF	Legal Fees	Statement	2
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Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal	4,526.	0.		4,526.
To Fm 990-PF, Pg 1, ln 16a	4,526.	0.		4,526.

Form 990-PF	Accounting Fees	Statement	3
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Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting	49,200.	2,000.		47,200.
To Form 990-PF, Pg 1, ln 16b	49,200.	2,000.		47,200.

Form 990-PF	Other Professional Fees	Statement	4
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Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Consulting on behalf of MeHAF	2,777.	0.		2,777.
To Form 990-PF, Pg 1, ln 16c	2,777.	0.		2,777.

Form 990-PF	Taxes	Statement	5
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Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Excise taxes	396,012.	0.		0.
Payroll taxes	55,693.	0.		55,693.
To Form 990-PF, Pg 1, ln 18	451,705.	0.		55,693.

Form 990-PF	Other Expenses	Statement	6
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Description	(a) Expenses Per Books	(b) Net Invest- ment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Office supplies & expenses	34,237.	0.		34,237.
Website	2,188.	0.		2,188.
Insurance	16,058.	0.		16,058.
Telecommunications	9,787.	0.		9,787.
Investment fees	373,635.	373,635.		0.
Program related expenses: contracts	296,604.	0.		296,604.
Program related expenses: consultants	57,862.	0.		57,862.
Program related expenses: conferences	5,158.	0.		5,158.
Program related expenses: grant management	20,913.	0.		20,913.
Program related expenses: communications	47,003.	0.		47,003.
Program related expenses: technical assistance	128,716.	0.		128,716.
Program related expenses: other	27,171.	0.		27,171.

Program related expenses:			
evaluation	106,567.	0.	106,567.
Program related expenses:			
needs assessment	86,201.	0.	86,201.
Accrual to cash conversion	0.	0.	21,831.
To Form 990-PF, Pg 1, ln 23	1,212,100.	373,635.	860,296.

Form 990-PF	Other Increases in Net Assets or Fund Balances	Statement	7
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Description	Amount
Net unrealized gain on investments	3,054,473.
Refunded grants	30,146.
Total to Form 990-PF, Part III, line 3	3,084,619.

Form 990-PF	Other Investments	Statement	8
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Description	Valuation Method	Book Value	Fair Market Value
Pimco Total Return Fund	FMV	4,168,312.	4,168,312.
Vanguard Inflation Protected	FMV	3,352,739.	3,352,739.
Vanguard Long Term Treasury	FMV	1,225,720.	1,225,720.
Vanguard Total Stock Market Index	FMV	11,710,194.	11,710,194.
ING Glogal Real Estate Fund	FMV	2,673,906.	2,673,906.
Vanguard MSCI Emerging Market	FMV	3,735,142.	3,735,142.
Adage Capital Partners	FMV	20,405,588.	20,405,588.
Axiom	FMV	0.	0.
Artisan Midcap Growth Fund	FMV	3,708,296.	3,708,296.
Colchester Global LP	FMV	5,746,077.	5,746,077.
Silchester International Tobacco Free	FMV	17,567,023.	17,567,023.
Wellington CTF Strategy Real Asset	FMV	0.	0.
Archstone Market	FMV	10,615,261.	10,615,261.
Adamas Opportunities, L.P.	FMV	4,802,268.	4,802,268.
FPA Crescent Fund	FMV	4,146,958.	4,146,958.
Parametric Emerging Markets	FMV	3,356,737.	3,356,737.
Vanguard Total International	FMV	6,311,492.	6,311,492.
Wellington CTF Commodities	FMV	4,212,406.	4,212,406.
RS Global Natural Resources Fund	FMV	4,228,059.	4,228,059.
Total to Form 990-PF, Part II, line 13		111,966,178.	111,966,178.

Form 990-PF	Other Assets	Statement	9
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Description	Beginning of Yr Book Value	End of Year Book Value	Fair Market Value
Program-related investment	750,000.	750,000.	750,000.
Refundable income taxes	74,000.	0.	0.
To Form 990-PF, Part II, line 15	824,000.	750,000.	750,000.

Form 990-PF	Other Liabilities	Statement	10
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Description	BOY Amount	EOY Amount
Deferred tax liability	376,000.	575,000.
Taxes payable	0.	17,000.
Total to Form 990-PF, Part II, line 22	376,000.	592,000.

Form 990-PF	Part VIII - List of Officers, Directors Trustees and Foundation Managers	Statement 11
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Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Expense Contrib Account
Wendy J. Wolf, MD, MPH 150 Capitol Street, Suite 4 Augusta, ME 04330	President & CEO 40.00	187,000.	19,506. 0.
Frank Johnson 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0. 0.
Nancy Fritz 150 Capitol Street, Suite 4 Augusta, ME 04330	Secretary 3.00	0.	0. 0.
Karen O'Rourke, MPH 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0. 0.
Lisa Sockabasin, BSN 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.
Cheryl Lee Rust 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	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	Trustee 3.00	0.	0. 0.
Sara Gagne-Holmes, Esq. 150 Capitol Street, Suite 4 Augusta, ME 04330	Chair 4.00	0.	0. 0.
Constance Sandstrom, MPA 150 Capitol Street, Suite 4 Augusta, ME 04330	Vice Chair 3.00	0.	0. 0.

Constance Adler, MD, FAAFP 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Roy Hitchings, Jr., FACHE 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Anthony Marple, MBA 150 Capitol Street, Suite 4 Augusta, ME 04330	Treasurer 3.00	0.	0.	0.
Ted Sussman, MD, MACP 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 3.00	0.	0.	0.
Bruce Nickerson, CPA 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.

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

187,000.

19,506.

0.

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 12

01-0535144
12/31/2013

THIS STATEMENT IS INTENTIONALLY LEFT BLANK

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 13

01-0535144
12/31/2013

PART I, LINE 19 & PART II, LINE 14

	<u>COST</u>	<u>DEPREC.</u>	<u>A/D</u>
FURNITURE & EQUIPMENT	284,052	17,404	236,583

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2013

01-0535144

Part IX-A: Summary of Direct Charitable Activities

The Maine Health Access Foundation (MeHAF) is the state's largest private, 501(c)(3) nonprofit health care foundation with a mission to *promote access to quality health care, especially for those who are uninsured and underserved, and improve the health of everyone in Maine.*

MeHAF 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.

Annually, MeHAF provides approximately \$3.5 to \$4 million in grant and program support to achieve its mission. The majority of MeHAF's programs and grantmaking focus on four strategic priority areas:

- Advancing Health System Reform
- Improving Access to Quality Care
- Promoting Patient-Centered Care across the Continuum of Care
- Achieving Better Health in Communities

Since the foundation's inception in April 2000, MeHAF has strived to be an independent and visionary leader in health philanthropy. The foundation is non-partisan, does not have members, and has a self-sustaining funding source through its invested endowment. MeHAF does not receive public funding or contributions for any of its activities. The foundation is governed by a 15-member statewide Board of Trustees that works closely with a statewide Community Advisory Committee.

Since 2002, MeHAF has awarded over \$52 million in grants and program support to organizations across Maine to advance transformative change. Grants provide resources so organizations can carry out important projects or activities, such as advocacy or public engagement, but funding alone is insufficient to spread successful strategies or innovative models to the tipping point of wide-scale adoption. However, our intent has always been on driving long-term, broad scale systemic improvements in health and health care delivery.

To accomplish this goal, we have become more directly engaged and embedded in the work of grantees to advance strategies that help connect, leverage and strengthen their efforts. For example, MeHAF now uses quarterly learning community meetings for grantees so they can discuss work, share successes and failures, and learn from national and local experts. We provide technical assistance, consultative help and convene experts to promote policy change that can sustain and strengthen our work.

In this summary of the foundation's 2013 activities, we highlight the impact of this deep partnership with our nonprofit and governmental partners, including such activities as:

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2013

01-0535144

- Promoting a statewide network of navigators, assisters and community groups to enroll Maine people in the new health insurance Marketplace;
- Working and advocating on behalf of new Americans to help them understand our complex health care system, and
- Promoting new payment models that served as building blocks for new \$33 million state Medicaid System Innovation grant.

In 2013, MeHAF worked with an array of partners from diverse sectors to advance our mission. The following represent examples of projects funded by our grant and program support in 2013

Connecting Mainers with Affordable Coverage through the Affordable Care Act Marketplace

Since 2010, MeHAF has partnered with a diverse group of community-based and statewide grantees to help Maine people get accurate, factual information about the federal Affordable Care Act (ACA), commonly known as “Obamacare.” In 2013, this outreach and education work took on new importance with the opening of new Health Insurance Marketplaces

As the centerpiece of the ACA, the Health Insurance Marketplace was designed to help individuals and small businesses easily compare and then enroll in high quality health plans. More importantly, Obamacare helps people with lower incomes purchase good coverage by providing financial help that can lower monthly premiums to meet tight household budgets.

States that set up their own Marketplace received substantial federal support to build state-specific websites and conduct intensive marketing. But Maine chose to rely on the federally-run Marketplace. As a result, Maine received very limited federal resources to hire and train assisters who could help consumers navigate this new way to shop for and purchase coverage.

MeHAF and the grantee consortium knew that the Marketplace premium subsidies provided an unprecedented opportunity to help uninsured and underinsured people get affordable coverage. But getting the word out to Maine people would require much more than just “boots on the ground.”

With strong support from its Board, MeHAF engaged Burgess Advertising and Marketing to develop a well-coordinated, aggressive marketing campaign to raise public awareness. The central focal point of the campaign was a new website, enroll207.com, which provided Maine-specific Marketplace information and a zip code locator that linked consumers with trained local, in-person ACA navigators, brokers, and other assisters.

From October to December, the campaign used television and radio ads, press events, bus-wraps, print materials, online ads, educational town hall and Chamber of Commerce forums, and a broad social media strategy to get the word out. These efforts complemented the extraordinary work of the network of on-the-ground assisters. Their day-to-day work reaching people in communities helped Maine become the most successful federally-facilitated Marketplace state in the country with the highest number of people enrolled per capita by December 31, 2013.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2013

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Health Reform Outreach & Education Grantee Profile Western Maine Community Action
After passage of the 2010 Affordable Care Act (ACA), Western Maine Community Action (WMCA) joined a consortium of eleven organizations funded by MeHAF to educate Maine people about Obamacare. WMCA's long-standing relationship with uninsured people in greater Franklin County and their connections with the Community Action Programs across Maine made them a strong partner. Their education efforts started small by mailing ACA brochures with heating assistance notifications and using in-person conversations with people who tapped WMCA for other services. Their growing ACA expertise eventually led WMCA to expand their efforts to other CAP agencies in the state. It also positioned them to become the successful applicant for federal Health Insurance Marketplace Navigator funding. As Maine's lead Marketplace Navigator, WMCA has worked tirelessly with the grantee collaborative, connecting partner organizations with successful enrollment strategies to ensure Mainers have access to affordable coverage so people can get the care they need.

Health Reform Outreach & Education Grantee Profile Somali Culture and Development Association & Maine Equal Justice Partners. When you bring a community-based organization with cultural expertise together with a statewide advocacy organization with legal and policy expertise, amazing things can happen. Brought together through MeHAF's Health Reform Outreach and Education collaborative, the Somali Culture and Development Association worked with Maine Equal Justice Partners to bring important information about health care and health reform to the immigrant, refugee and asylee communities in Maine. Since 2010, the two organizations have held community gatherings across Portland and Lewiston for new Mainers who have come from all over the world, often from war-torn regions. The information they provide is critical to the well being of the immigrant families they reach, and the two organizations are now widely accepted as *the* trusted source for interpreting complex information about health care. This combination of cultural awareness and legal expertise has truly helped change people's lives for the better.

Supporting Connections to Inform Policymaking

Advocacy Gives Voice to Serves Vulnerable People: Efforts to transform health care delivery and improve health should be shaped by the voices of vulnerable people – particularly those who are uninsured and underserved. Woven throughout MeHAF's work is the requirement that grantees actively solicit the advice of uninsured people and those with low incomes to guide their work. As the Maine Legislature weighs important decisions prompted by the Affordable Care Act, MeHAF support to advocacy organizations helps ensure the issues and concerns of lower income people, including those who are uninsured, are front and center to inform and shape policy. Nowhere has this been more crucial than in the debate surrounding preserving coverage through Maine's Medicaid program as an essential safety net for lower income Mainers. For the last two years, advocates have received funding to conduct policy research, gather stories and testimonials, review and strengthen regulations, and work to educate and engage the public to build grassroots support.

Connecting Legislators to Information and Experts: Every year Maine's citizen legislature deals with complex health care issues that can challenge even the most experienced and informed experts. To help legislators make sound policy decisions, MeHAF has partnered with the Maine Development Foundation to plan their biennial, non-partisan Policy Leaders Academy program (PLA) program that highlights key policy issues affecting the Maine economy. Since health care

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14

Year Ended December 31, 2013

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represents the third largest sector of Maine's economy, MeHAF has helped develop educational sessions that focus on emergent health care issues that legislators are likely to see during the session. By tapping into the foundation's extensive networks of partners, MeHAF helps design educational sessions that provide robust and very diverse perspectives on those health care issues that are likely to drive policy and budget discussions. Legislators are encouraged to reach out to these experts throughout the session, connecting them to the information they need to make important health policy decisions that will impact the health and well being of everyone in Maine.

Cultivating Connections to Yield Big Payoffs

Developing new models to deliver higher quality, patient-centered care linked to a redesigned payment system is crucial for transforming health care. Pursuing this vision is a long journey. You need patience, persistence, and the support of an ever-widening circle of people to reach the destination.

Eight years ago MeHAF started promoting the integration of behavioral health with primary care. By working with a group of grantees who were early adopters, the once radical notion of providing "integrated care" eventually reached the tipping point to where it is now the accepted norm across the state.

Improving care delivery is hard, but fundamentally changing how we pay for care is a challenge of even greater magnitude. For seven years, MeHAF has worked with a group of grantees to advance payment reform in ways that meet the Triple Aim: improving population health, enhancing patient experiences and health outcomes, and reducing the cost of care. Payment reform grantees included several innovators, including Maine Quality Counts, the Maine Health Management Coalition (MHMC), and HealthInfoNet, as well as the state Medicaid (MaineCare) program.

Although the Triple Aim provided a common framework, their projects were not fully connected. But through the grantees' work with one another and through MeHAF-sponsored meetings, they began to identify areas of alignment and synergy. Quality Counts' development of Community Care Teams to support the statewide Patient-Centered Medical Homes demonstration project provided a model that is a critical element of MaineCare's "Value Based Purchasing Strategy".

MHMC's workgroup of health systems, payers, large employers and MaineCare helped support the work of private and public payers so Accountable Care Organizations could more easily develop across the state. And Maine's statewide Health Information Exchange (HealthInfoNet) created new analytic tools to demonstrate how powerful databases can align payment reform with better care delivery.

This synergy helped position each organization to serve as a key partner in Maine's new federally-funded \$33 million State Innovation Model grant. As MaineCare's Director of Strategic Initiatives noted, "MeHAF funding was the seed. Without it, these initiatives would not have developed as they did, and Maine would never have been successful in getting the SIM grant."

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Cultivating Stronger Connections to Enhance Learning and Efficiency

Learning Communities Promote Collaborative Action: Grants allow organizations to conduct important projects or activities, but grant support alone is not enough to drive large scale, transformational changes in health and health care. People need more than money – they also need guidance, experience, support and know-how. To provide this extra support, MeHAF uses regular learning community meetings as a key strategy to advance the work of our grantees. These quarterly meetings were a core strategy in advancing the integration of physical and behavioral health state wide. Grantees get to step back from their regular duties to think more broadly about their work and how they effect change within their organizations. Learning communities also add visibility to the work, strengthen networks, supported collaborations and new connections, and generate new thinking about entrenched problems. Although MeHAF taps local and national experts to share their expertise, the most valuable learning comes from peer-to-peer learning. Through the learning communities, we've learned the whole is much greater than the sum of its parts.

Streamlined Grants Management Makes MeHAF a Better Partner: When people think about grants management, they often perceive this as a necessary and important back office function; but perhaps not central to the success of the project. MeHAF takes a different view: our grants management staff want each stage of the grant process – from submission of the initial request for funding to final reporting as opportunities to connect with and support grantees and applicants to meet project objectives. From information sessions held at the start of each program initiative, to live and on-demand technical assistance webinars, to simple phone calls or emails asking questions, grants management staff is ready to help. Over the years, we've worked to streamline grantmaking processes to reduce the burden on grantees and applicants so they can focus on achieving their grant objectives. We're committed to continuing to research best practices and listen to our grantees and applicants to strengthen connections and promote high quality funding outcomes.

These projects represent examples of how MeHAF deploys an array of strategies to advance our work. In 2013, 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 2013.

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Advancing Health System Reform - Education, Outreach & Enrollment					
Community Concepts, Inc 240 Bates Street Lewiston, ME 04240	\$120,000.00	\$60,000.00	\$60,000.00	PC	Community Concepts, in partnership with the Lewiston/Auburn Neighborhood Network and the Horn of Africa and Rehabilitation Action Network, will increase awareness and education about the Affordable Care Act throughout Androscoggin, Oxford & Franklin Counties. Focus populations include the immigrant community, those of all heritages in nontraditional secondary education, part-time workers, unemployed workers, self-employed and small business owners.
Consumers for Affordable Health Care Foundation 12 Church St P O Box 2490 Augusta, ME 04338-2490	\$30,000.00	\$30,000.00	\$0.00	PC	CAHC will deploy a training program that successfully trains dozens of individuals and organizations about ACA coverage and how to become CACs to assist others, deliver content expertise to individuals, health care and social service providers, and businesses to advance understanding of the ACA; deploy staff to begin to fill gaps in existing outreach plans to the greatest extent possible, and develop a plan to coordinate currently unfunded partner organizations that are committed to obtaining needed resources to maximize enrollment in Marketplace coverage, including MaineCare.
Consumers for Affordable Health Care Foundation 12 Church St P O Box 2490 Augusta, ME 04338-2490	\$250,000.00	\$250,000.00	\$0.00	PC	Enroll ME will build upon, strengthen, and expand Consumers for Affordable Health Care's current activities to reach and enroll as many uninsured and underinsured Mainers as possible into Qualified Health Plans (QHPs) during the open enrollment periods at the beginning and end of 2014, and to identify and address systemic problems.
Division of Public Health, HHS Dept., City of Portland 389 Congress Street Portland, ME 04101	\$119,998.00	\$59,999.00	\$59,999.00	PC	Portland has the largest population in Maine of every race/ethnicity -- almost 10,000 non-white residents and approximately 15% of the city's population. Many are refugees/immigrants, asylees, individuals on visas, and undocumented persons, who are uninsured/underinsured needing outreach, education and enrollment into the ACA Marketplace. We will assist community members through the process of outreach, education and enrollment into the ACA/Marketplace while working with our partners.
Hand in Hand / Mano en Mano, Inc P O Box 573 Milbridge, ME 04858	\$30,000.00	\$16,000.00	\$14,000.00	PC	REinFORMA 2014 will raise awareness about the new Health Insurance Marketplace and continue raising awareness about the Affordable Care Act so that our target populations have the tools and knowledge needed to access quality health care. We will target low-income and underinsured or uninsured Mainers with a special focus on immigrants, migrant workers, and non-English speakers. Work will cover all of Washington County and include migrant communities in Turner, Lewiston, West Paris, and Aroostook County. Staff and partners will speak the language of our target audience, meaning that information can be passed directly and more effectively.

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Healthy Community Coalition of Greater Franklin County 105 Mt Blue Circle, Suite #1 Farmington, ME 04938	\$120,000 00	\$60,000 00	\$60,000 00	PC	Through the Franklin's Focus on Advancing Health Care Reform Initiative HCC staff, volunteers, and partners will offer education about the Affordable Care Act and opportunities to enroll in the Health Insurance Marketplace HCC will focus on bringing these services throughout Franklin County and the surrounding towns. Approximately 25,000 community members will be reached through this initiative HCC staff and volunteers will become trained Navigators in collaboration with Western Maine Community Action Navigator Consortium
Maine Association of Area Agencies on Aging P O Box 5415 Augusta, ME 04332	\$120,000 00	\$60,000.00	\$60,000 00	SO III FI	The Maine Association of Area Agencies on Aging (M4A), with its implementing partners, Maine's five Area Agencies on Aging, which are all also federally designated Aging and Disability Resource Centers (ADRCs), will use an existing extensive communications network to provide clear, unbiased Marketplace information to uninsured older adults age 50 to 64, disabled adults and family caregivers The ADRCs will increase enrollment opportunities for older adults directly at ADRC locations by providing Navigators space and collaborating to schedule group enrollments M4A will also provide adults over 65 with information on the impact of the Marketplace on Medicare and on how to avoid scams.
Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	\$61,792 00	\$30,596 00	\$31,196.00	PC	MEJP will focus its outreach and education activities on Maine's immigrant and refugee communities by working with community groups and leaders representing immigrant populations in Maine, including Maine's migrant populations This project will provide information and resources about opportunities for coverage through the ACA, MaineCare, and other public assistance resources MEJP will also work directly with providers and certified assisters that serve immigrants and refugees to ensure that they understand the changes in coverage and options available to people, and can convey that information to their clients/patients
Maine Medical Education Trust P O Box 190 30 Association Drive Manchester, ME 04351	\$85,790 00	\$42,895 00	\$42,895 00	PC	In furtherance of its mission to advance the quality of medicine in Maine and promote the health of all Maine citizens, the Maine Medical Education Trust (MMEET) seeks to increase health care provider and patient understanding of coverage opportunities created by the Affordable Care Act, primarily opportunities to enroll in the Health Insurance Marketplace MMEET will work with the Maine Medical Association (MMA) to carry out project activities centered around creating and distributing patient materials to, and offering training opportunities for, health care professionals and health systems, which can then disseminate this information to reach low income, uninsured and underinsured Mainers and enhance their overall understanding of coverage opportunities and enrollment in Marketplace plans

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Maine People's Resource Center 565 Congress St #200 Portland, ME 04101	\$120,000.00	\$60,000.00	\$60,000.00	PC	Maine People's Resource Center (MPRC) will engage thousands of Mainers about the new health insurance Marketplace and the importance of enrolling in health coverage starting in 2014, through (a) door-to-door canvassing in communities surrounding navigator sites (b) training local volunteers from low/moderate-income communities to share information within their own networks (c) leveraging existing relationships with immigrant-owned small businesses to reach members of Maine's immigrant & refugee populations and (d) conducting outreach to the 32,000 members of the Maine People's Alliance and the 3,600 members of the Maine Small Business Coalition
Maine Primary Care Association 73 Winthrop Street Augusta, ME 04330	\$25,000.00	\$25,000.00	\$0.00	PC	Maine Primary Care Association (MPCA) received one-time funding from The Health Resources and Services Administration (HRSA) to support outreach and enrollment work with Federally Qualified Health Centers (FQHCs). MeHAF funding will enable MPCA to take a more inclusive and expansive approach, acting as liaison with other community groups to inform outreach and enrollment strategies--not only at FQHCs but with key partners across the state. Developing a coordinated and comprehensive strategy to conduct outreach and enrollment activities for these individuals will require collaboration and cooperation between FQHCs and their community partners.
MaineHealth 110 Free Street Portland, ME 04101	\$119,732.00	\$59,912.00	\$59,820.00	SO III FI	MaineHealth will conduct outreach and education about the ACA Marketplace to priority populations in our 11-county catchment area (Androscoggin, Cumberland, Kennebec, Knox, Lincoln, Oxford, Sagadahoc, Waldo, York, Somerset and Franklin)
Planned Parenthood of Northern New England 128 Lakeside Avenue, Ste 301 Burlington, VT 05401	\$120,000.00	\$60,000.00	\$60,000.00	PC	PPNNE's Marketplace Outreach & Education Program aims to reach and educate uninsured people about enrolling in public and private health insurance through the Marketplace. With a focus on reaching women and other vulnerable populations primarily in the Biddeford and Sanford areas, the program is intended to serve both patients and non-patients in our two lowest income and most underserved health center communities in the state
Preble Street 38 Preble Street Portland, ME 04101	\$120,000.00	\$60,000.00	\$60,000.00	PC	Preble Street will target low and moderate income veterans and their families throughout Maine using the framework of its successful outreach with veterans through the Preble Street Veterans Housing Services that targets veterans' households who are homeless or at risk of homelessness

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Somali Culture And Development Association 107 Elm Street - Suite 100E PO Box 8876 Portland, ME 04101	\$120,000.00	\$60,000.00	\$60,000.00	PC	The Somali Culture and Development Association of Maine (SCDA), in collaboration with the African/ Middle Eastern refugee communities living in Portland, Maine, will address refugee health literacy, health care enrollment, and education about health care benefits, non-clinical care and understanding available resources. SCDA will partner with New Maner Public Health Initiative (NMPHI) in Auburn to expand services in the L/A area while building organizational capacity for NMPHI. The outreach, education and enrollment work plan involves working collaboratively with multiple groups and embraces a community health outreach worker model to provide culturally and linguistically appropriate services provided by trusted community leaders.
Western Maine Community Action P O Box 200 20A Church St. East Wilton, ME 04234	\$25,000.00	\$25,000.00	\$0.00	PC	Western Maine Community Action is the lead agency for a statewide consortium including eight Maine community action agencies - the WMCA Community Action Navigator Consortium. The overarching goal of the Consortium is to provide a statewide network of education, outreach and enrollment assistance available and accessible to every uninsured and underinsured individual in Maine. Over 100 Certified Navigators (staff and volunteers) will be providing public outreach and education and enrollment assistance to uninsured Mainers seeking information and in-person assistance to understand their new options in the ACA Health Insurance Marketplace.
Advancing Health System Reform - Advocacy					
Consumers for Affordable Health Care Foundation 12 Church St P.O. Box 2490 Augusta, ME 04338-2490	\$150,000.00	\$75,000.00	\$75,000.00	PC	Consumers for Affordable Health Care (CAHC) will work to ensure that as many low and moderate income uninsured and underinsured Mainers gain newly available ACA coverage, keep their MaineCare coverage, or find alternative sources of coverage like hospital free care. Key decisions about eligibility will be made in administrative rules or hearings in 2014. CAHC wants to ensure that MeHAF's priority populations have a strong voice in administrative forums that will impact the affordability, accessibility, and comprehensiveness of their health benefits and coverage.
Maine Center for Economic Policy PO Box 43766 Winthrop StreetAugusta, ME 04330	\$135,000.00	\$65,000.00	\$70,000.00	PC	MECEP will advocate to ensure that Maine accepts federal health care funds to provide affordable access to critical health services to 69,500 Mainers with low incomes. In pursuit of this goal, MECEP will lay the foundation for more effective advocacy and civic engagement focused on improving access to affordable health care for all Maine people. Emphasizing the economic benefits from expanding Medicaid, MECEP will analyze the impacts of failure to expand health care on Maine people, communities, and hospitals, and will quantify the loss of jobs and revenues by county.

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Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	\$149,042 00	\$74,328 00	\$74,714 00	PC	Maine Equal Justice Partners will conduct administrative advocacy to ensure successful implementation and administration of ACA Medicaid and Marketplace components that affect people with low incomes
Maine Medical Education Trust P.O. Box 190 30 Association Drive Manchester, ME 04351	\$133,975 00	\$66,987 50	\$66,987 50	PC	In furtherance of its mission to advance the quality of medicine in Maine and promote the health of all Maine citizens, the MMET will ensure that the needs and perspectives of individuals with low incomes, who are uninsured or who have behavioral health conditions are addressed in policy and regulatory decisions related to implementation of the Affordable Care Act. MMET will combine proven advocacy approaches with acquiring meaningful input from patients, providers and appropriate organizations to enhance the quality of advocacy related to implementing health reform.
Maine People's Resource Center 565 Congress Ste #200 Portland, ME 04101	\$100,000 00	\$50,000.00	\$50,000 00	PC	Maine People's Resource Center (MPRC) will work to identify hundreds of Mainers affected by ACA-related policy decisions (such as accepting federal funds to expand MaineCare), to develop their skills and confidence in sharing their personal stories with decision-makers and the press, and to bring their voices to the coalition advocacy efforts advanced by Health Care for Maine and Cover Maine Now.
Advancing Health System Reform - Payment Reform					
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	\$293,087.00	\$81,400 00	\$103,009 00	PC	Evaluation of MeHAF's Advancing Cost Containment and Payment Reform. Strategies in Support of the Affordable Care Act.

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Advancing Health System Reform - Policy/Data Research					
State of Maine, Dept of Health and Human Services, Office of MaineCare Services 221 State Street Augusta, ME 04333-6846	\$75,000 00	\$75,000 00	\$0 00	PC	The Office of MaineCare Services will perform an actuarial analysis of the MaineCare Childless Adult population for purposes of determining if the State is eligible to receive an increased federal match assistance percentage (FMAP) on expenditures for eligible members of the Childless Adult population.
Gorman Actuarial, LLC 210 Robert Road Marlborough, MA 01752	\$16,000 00	\$16,000 00	\$0 00	NC	MeHAF will contract with Gorman Actuarial to provide technical support and expertise on actuarial matters.
GfK Custom Research, LLC 2100 Geng Road, Suite 210 Palo Alto, CA 94303	\$29,800.00	\$14,900 00	\$14,900 00	NC	The Maine Health Reform Monitoring Survey (HRMS-Maine) leverages a national effort to examine the effects of the Affordable Care Act. It augments the national Health Reform Monitoring Survey (HRMS) developed by Urban Institute. Conducted by GfK, it provides a baseline of information for the measure of coverage reforms and related health outcomes. It tracks over time Health coverage, Access and use of health care, affordability, and health status.
Advancing Health System Reform - Other					
Maine Community Health Options 70 Lincoln Street Suite 1-C P O Box 1121 Lewiston, ME 04243	\$300,000 00	\$300,000 00	\$0 00	NC	This project encompasses a robust marketing and outreach effort to ensure that the MCHO target population of uninsured, underinsured and underserved are both aware of the opportunity for coverage through MCHO as a qualified health plan on the Exchange and have information on the availability of subsidies, cost sharing reductions and how to enroll.
Subtotal, Advancing Health System Reform Grant (23) & Contract (3) Payments = \$1,778,017.50					

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Promoting Patient-Centered Care: Behavioral Health Homes/Integration Initiative					
Aroostook Mental Health Services, Inc (dba AMHC) 43 Hatch Drive, P O Box 1018 Caribou, ME 04736	\$25,000 00	\$25,000 00	\$0.00	PC	Aroostook Mental Health Services (AMHC) will develop Behavioral Health Home service delivery capacity in its seven outpatient clinic sites across three counties, Aroostook, Hancock and Washington Counties in the communities of Caribou, Presque Isle, Fort Kent, Madawaska, Houlton, Calais, Machias, and Ellsworth. AMHC will work to advance four major objectives for customers with Serious Emotional Disturbance (SED)/Serious and Persistent Mental Illness (SPMI): increased access to care—"no wrong door" experience for customers, improved provider and customer satisfaction, improved patient health and behavioral health status, and improved cost management and health care cost savings.
Charlotte White Center 572 Bangor Road Dover-Foxcroft, ME 04426	\$25,000 00	\$25,000 00	\$0 00	PC	The Charlotte White Center (CWC) will complete a one-year planning process to develop the infrastructure for implementing a rural behavioral health home (BHH) for adults with SPMI. To prepare for the substantial changes this transformation requires, CWC will orient staff to integrated care and the BHH concept. Case managers will be trained to facilitate the model, ensuring that they understand and support the "triple aim" of better care, improved health, and lower costs. They will also master the skills necessary to encourage consumers to become more informed, active agents in their own health care.
Maine Primary Care Association 73 Winthrop Street/Augusta, ME 04330	\$200,000 00	\$100,000 00	\$0 00	PC	MPCA will develop a peer-to-peer Federally Qualified Health Center (FQHC) mentorship program and a direct technical assistance support structure to ensure that all FQHCs in Maine have implemented some level of integrated behavioral health and primary care by 2015.
Maine Quality Counts 16 Association Drive Box 190 Manchester, ME 04351	\$240,000 00	\$80,000 00	\$0.00	PC	Maine Quality Counts will provide technical assistance to additional primary care practices to transform to a "Patient Centered Medical Home" (PCMH) model of care. Specifically, QC staff will provide technical assistance to PCMH and Health Home practices to support improvements in their integration of physical and behavioral health care, and to improve their capacity to engage patients as partners in this effort as part of QC's support of the wider adoption of the PCMH model.

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MaineGeneral Community Care/HealthReach Network 10 Water St Suite 302 Waterville, ME 04901	\$25,000.00	\$25,000.00	\$0.00	PC	On behalf of Mid Maine Behavioral Health, HealthReach Network will convene a planning effort to develop a continuum of workable, carefully coordinated best-practice models for the implementation of Behavioral Health Homes for persons experiencing severe and persistent mental illness, substance abuse and children's severe emotional disorder in Kennebec and Somerset counties
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04101	\$25,000.00	\$25,000.00	\$0.00	PC	The Opportunity Alliance (TOA) will create a Behavioral Health Home to meet the primary care, behavioral health, and community living needs of those living with severe and persistent mental illness and other chronic health conditions. This project will allow TOA to focus on the development of a plan for the transformation of the organization's service delivery model to a BHH model, working with clients, staff and community partners
Tri-County Mental Health Services P O Box 2008 Lewiston, ME 04241-2008	\$25,000.00	\$25,000.00	\$0.00	PC	In partnership with Central Maine Healthcare, TCMH will coordinate and integrate services for people with severe and persistent mental illness (SPMI) by incorporating services of a full-time Nurse Practitioner into the Community Mental Health Center in Lewiston, Maine. The NP will work with mental health clinicians, case managers, psychiatrists, peers, as well as community health education and wellness providers to establish a health home for adults with SPMI in order to improve their health status, increase access to care, and reduce the per capita cost of care
John Snow, Inc (JSI) 44 Farnsworth Street Boston, MA 02210-1211	\$249,767.00	\$99,767.00	\$0.00	NC	JSI will provide consulting services to support MeHAF's Integration Initiative cross-site evaluation
Promoting Patient-Centered Care - Improve Care Coordination Across the Continuum of Care					
Aroostook Area Agency on Aging, Inc. 1 Edgemont Drive, Suite B Presque Isle, ME 04769-1288	\$40,000.00	\$40,000.00	\$0.00	PC	This project brings together several key health and social service providers, as well as consumers and informal caregivers for a common purpose - to help our growing elderly population and adults with disabilities and chronic health conditions maintain their health so they can remain in their home. We have set forth a process to take a comprehensive look at the target population's needs and will examine across social, medical and behavioral health systems what works, what does not work well and why and what needs to be done to improve systems. Through collaboration and focusing on enhancing community support, we can improve access to care making it possible for people to Thrive in Place Across a Continuum of Care

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Charlotte White Center 572 Bangor Road Dover-Foxcroft, ME 04426	\$40,000 00	\$40,000 00	\$0 00	PC	The Charlotte White Center (CWC) will collaborate with seventeen major partners and a diverse group of other stakeholders in Piscataquis County to establish a Thriving in Place (TiP) Collaborative that will strengthen and expand the region's capacity to prevent individuals with chronic needs from requiring hospitalization and institutional care
Child and Family Opportunities, Inc P O. Box 945 18 Avery Lane Ellsworth, ME 04605	\$40,000 00	\$40,000 00	\$0 00	PC	Thriving Downeast will bring together resources that exist and resources yet unknown to improve the health of individuals in ways that fit and sustain each caring community Thriving Downeast aims to work cooperatively and collaboratively with health providers, community and social supports, and at-risk individuals and their families to build collaboration and improve health in our towns Healthy Peninsula and its partners commit to keeping the most vulnerable of our population healthier and safer in their homes
Coastal Enterprises, Inc 36 Water Street P O. Box 268 Wiscasset, ME 04578	\$40,000 00	\$40,000 00	\$0.00	PC	CEI and a diverse group of 22 stakeholders who participated in CEI's Aging Demographic and Economic Development (ADED) Initiative are building on a collaborative planning process started in 2012 to address aging issues in Lincoln County This project will identify and prioritize the integration and/or expansion of policies, practices, systems, and services that support adults who are at home or in communities, and are vulnerable to hospitalization and institutionalization Partners are committed to identifying economically viable non-medical interventions that can improve medical outcomes and social determinants of health in preparation for a community-based implementation project
Penobscot Community Health Center 103 Maine Avenue Bangor, ME 04401	\$40,000 00	\$40,000 00	\$0 00	PC	"Connect and Engage" will mobilize existing community partnerships to design streamlined interventions that will improve health outcomes and quality of life for at-risk and chronically ill individuals in the greater Bangor area PCHC will serve as the lead agency and with two primary partners (Eastern Area Agency on Aging and University of Maine Center on Aging) will convene a community-wide Planning Committee made up of healthcare, behavioral health, substance abuse, and social service providers, individuals, and government agencies to identify community assets, gaps, and impediments to a high quality of life for at-risk individuals, solicit input from individuals and their family members and caregivers, develop a comprehensive intervention strategy to reduce the risk of in-patient or institutional care and allow chronically ill individuals to thrive in their homes for as long as possible, develop strategies for identifying individuals to participate in the implementation of this initiative, develop a mechanism for data-sharing among organizations, and research technological solutions

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SeniorsPlus 8 Falcon Road Lewiston, ME 04240	\$40,000 00	\$40,000 00	\$0 00	PC	SeniorsPlus and its partners will create an innovative plan to assist consumers with chronic conditions to remain at home-comfortably and happily. Building on a collaborative foundation created by our grant partner Western Maine Community Action (WMCA), we will narrow their county-wide scope to focus on the communities of Rangeley and New Sharon. We will expand on the data assessments and engage the seven partners in the process as we convene stakeholders, consumers, and unlikely partners from the arts community to Central Maine Power workers. We will collect data, coordinate physical and behavioral health and community supports, develop new strategies, and create an integrated system of community care to implement for the uninsured, underinsured and medically underserved.
Town of Bucksport, Maine P O Drawer X Bucksport, ME 04416	\$40,000 00	\$40,000 00	\$0 00	PC	The Bucksport Bay Thriving in Place Collaborative is comprised of 16 organizations and consumers, who are committed to establishing an accessible, coordinated, and effective continuum of care for adults and citizens with disabilities who are coping with chronic illnesses in the Bucksport Bay area. Collaboration partners will establish a governance structure to support the goals and long-term work of the Thriving in Place Project. An interdisciplinary team of collaboration partners has been convened to engage the public and community leaders across the Bucksport Bay region to assist in assessing the needs, challenges, barriers, assets and options to better serve the needs of community members who want to live independently in their home for as long as possible. This planning framework will provide an implementation plan based on prioritized strategies identified through the assessment process.
York County Community Action Corporation P O Box 72 Sanford, ME 04073	\$39,780 27	\$39,780 27	\$0 00	PC	The YCCAC Home Project is a planning initiative developed by York County Community Action in partnership with health care providers, community and social service organizations, planning and educational agencies, and consumers. Through monthly planning sessions, research, community assessment and online discussion, the planning group will work together to identify gaps and coordinate services to support local residents whose chronic disease, disability and/or advanced age put them at risk for hospitalization or institutionalization. Focusing on care coordination, infrastructure enhancements and evidence-based and evidence-informed practices, the planning group will develop a comprehensive work plan designed to coordinate care and track health outcomes for the project's target populations.
Subtotal, Promoting Patient-Centered Care Grant (15) & Contract (4) Payments =					\$724,547.27

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Improve Access to Quality Care - Access to Quality Care					
Islands Community Medical Services Inc 15 Medical Center Loop Vinalhaven, ME 04863	\$50,000.00	\$50,000 00	\$0.00	PC	Islands Community Medical Services, Inc. will partner with Penobscot Bay Medical Center (PenBay), The Island Institute, Ivan Calderwood Eldercare Services, North Haven Medical Center and Islesboro Rural Health Center to identify barriers in quality care and to improve a patient's experience during transitions of care for low-income and uninsured island residents. Our collaborative partners will conduct a baseline assessment on health care services for the uninsured and low-income population, which will provide a tool for our service area planning and goal-setting. Our results will profile the low-income and uninsured population in our service area, the volume of uninsured who accessed primary care in our service area, additional indicators of primary care wait times, specialty care wait times and emergency department use.
MaineHealth 110 Free Street Portland, ME 04101	\$297,854 00	\$98,825 00	\$199,029.00	SO III FI	To expand access to care for uninsured and underinsured adults, MaineHealth and its partners propose to expand CarePartners to York County, one of Maine's most populated regions. CarePartners is a highly collaborative, sustainable model that has been implemented in four Maine counties. Evaluations have found that it improves access to physical and behavioral health services, linkages with community resources, appropriate utilization of healthcare resources, and self management, while also reducing costs. Patient enrollment will begin by February 1, 2014. The program will be locally administered at an office site provided by Southern Maine Medical Center/Goodall Hospital, and MaineHealth will provide centralized services to include marketing and information systems.
Mercy Hospital 144 State Street Portland, ME 04101	\$50,000 00	\$50,000 00	\$0 00	PC	Mercy's Medical Neighborhood has achieved the "Triple Aim" of lower costs with improved outcomes for a cohort of uninsured patients in Portland. Through legal agreements for seamless data sharing, policy revision, effective utilization management, case management in the emergency department (ED), and care coordination that extends well beyond the traditional system of care, we now know the most vulnerable better and have improved their quality of life. Patients that present to the ED without a medical home are provided several options for primary care that include warm hand-offs, phone calls, and screenings for potential resources.
Mid-Coast Health Net Inc 22 White Street Rockland, ME 04841	\$50,000 00	\$50,000 00	\$0 00	PC	Mid Coast Health Net is the parent organization of the Knox County Health Clinic, which provides free or low-cost medical, dental, behavioral health, and prescription assistance to the medically uninsured and underinsured in Knox County with incomes of less than 200% of Federal Poverty Level (FPL). Grantee will implement a community planning process to improve the delivery of medical, dental and behavioral health services to individuals who are low-income and medically uninsured/underinsured in Knox County. The process will build on, and integrate with, other related community planning.

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Penobscot Community Health Center 103 Maine Avenue Bangor, ME 04401	\$49,997.00	\$49,997.00	\$0.00	PC	Penobscot Community Health Center, in conjunction with Penquis Community Action Program, will lead a coalition of 26 organizations in greater Bangor representing health care and social service providers, local governments, businesses, and low-income consumers, in a comprehensive planning process designed to assure a sustainable health care safety net for people who will remain uninsured after the full implementation of the Affordable Care Act in Maine. The coalition will model its efforts on the Accountable Care Communities design and will review successful models that address the needs of the uninsured and determine which elements can be adapted to the Bangor area.
Portland Community Health Center 180 Park Avenue Portland, ME 04102	\$50,000.00	\$50,000.00	\$0.00	PC	Portland Community Health Center (Portland CHC), in partnership with the Greater Portland Refugee Immigrant Healthcare Collaborative (GPRHC) and its member organizations, will create a plan that offers a Coordinated System of Care of care for low income immigrants, including asylum seekers, living in Cumberland County who will remain uninsured after the implementation of the Affordable Care Act (ACA). This planning project will culminate in a final report with a recommended community care model, payment structure, and associated implementation timeline.
Improve Access to Quality Care - Oral Health					
Aroostook Dental Clinic 122 Academy St Suite A Presque Isle, ME 04769	\$5,000.00	\$5,000.00	\$0.00	PC	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.
Community Dental 366 US Route 1 Falmouth, ME 01405	\$5,000.00	\$5,000.00	\$0.00	PC	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.
Fish River Rural Health P O Box 309 Eagle Lake, ME 04739	\$5,000.00	\$5,000.00	\$0.00	PC	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.

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Health Care for the Homeless, Public Health Department, City of Portland 20 Portland Street Portland, ME 04101	\$5,000 00	\$5,000.00	\$0 00	PC	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.
HealthWays/Regional Medical Center at Lubec, Inc 43 South Lubec Road Lubec, ME 04652	\$5,000 00	\$5,000 00	\$0 00	PC	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.
Lincoln County Dental Inc 748 Main St Damariscotta, ME 04543	\$5,000 00	\$5,000 00	\$0 00	PC	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.
York County Community Action Corporation P O Box 72 Sanford, ME 04073	\$5,000 00	\$5,000 00	\$0 00	PC	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.
Improve Access to Quality Care - Other					
Maine Quality Counts 16 Association DriveBox 190Manchester, ME 04351	\$25,000 00	\$25,000 00	\$0 00	PC	MeHAF funding will support the 10th annual Maine Quality Counts annual conference, held in partnership with the Maine Primary Care Association, Maine Public Health Association, with guidance and leadership from the Maine Health Access Foundation, and in collaboration with many local organizations that support quality health and health care for the State of Maine and its citizens.

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
Portland Community Health Center 180 Park Avenue Portland, ME 04102	\$60,000.00	\$60,000.00	\$0.00	PC	Portland Community Health Center (Portland CHC) will work to preserve, as well as sustain, access to reliable and affordable primary care for underserved residents, improve health outcomes through the effective management of chronic health conditions, and connect patients to all available community resources, and to participate in concentrated efforts to enhance community collaboration, continuity of care, and shared resources to care for Portland's low income and uninsured residents. Portland CHC will utilize outreach and enrollment specialists and other health care providers to expand access to 500 underserved and assure their enrollment, preventive care, and chronic disease identification and management.
Subtotal, Improving Access to Quality Care Grant: (15) Payments = \$468,822					
Achieving Better Health in Communities - Healthy Community Grants Program					
Aroostook Band of Micmacs 7 Northern Road Presque Isle, ME 04769	\$20,000.00	\$20,000.00	\$0.00	PC	The Aroostook Band of Micmacs will complete an inquiry and community engagement process that will serve as the basis for the future Netukulmk Community Health Plan. Our Tribal Planner will be planning and convening the focus groups and community meetings, and our Cultural/Community Director will participate in the meetings to ensure the process reflects Native traditions and spirituality. Our key partner will be Maine Rural Partners, who will assist in designing a community survey instrument and train Micmac high school youth to administer the survey. They will also assist our Tribal Planner in tabulating data and writing the final report. Cary Medical Center and the Micmac Health Department have also pledged their support through the year-long pre-planning process.
Aroostook County Action Program, Inc. 771 Main Street P.O. Box 1116 Presque Isle, ME 04769	\$20,000.00	\$20,000.00	\$0.00	PC	This project will bring diverse sectors and our priority population, those who are economically insecure, together to determine a priority health issue that disproportionately impacts low wage earners. The group will review current data, administer surveys, hold focus groups and have agencies engage their clients to ensure that the target population fully participates in the process. Houlton will be our defined geographic area for this project as they have demonstrated a growing commitment to make their community better. The project will be a community-led effort, with all citizens having the opportunity to participate.

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City of Bangor, Health & Community Services 103 Texas Avenue Bangor, Maine 04401	\$19,480.00	\$19,480.00	\$0.00	PC	This project will bring together a diverse and representative group of partners for the initial pre-planning phase of the MeHAF Healthy Communities grants program. Our partners, comprised of public and private organizations across multiple industries and sectors, will work collectively to identify the health issues for this region. At the conclusion of this one-year project, we will have identified 1-2 critical health issues that warrant attention in the Greater Bangor region.
Community Concepts, Inc 240 Bates Street Lewiston, ME 04240	\$20,000.00	\$20,000.00	\$0.00	PC	Community Concepts (CCI), Healthy Androskoggin (HA), St. Mary's Nutrition Center (NC) and a core of eight additional community-based organizations have formed a work group to facilitate a year-long pre-planning process and associated activities. Community stakeholders will identify up to two priority health issues, to be worked on through collaborative initiatives.
Healthy Communities of the Capital Area 36 Brunswick Avenue Gardiner, ME 04345	\$20,000.00	\$20,000.00	\$0.00	PC	Healthy Communities of the Capital Area (HCCA) will partner with Medical Care Development (MCD Public Health) to use skills and experiences from the two organizations to lead engagement of leaders, stakeholders and populations of focus with health disparities in an Interactive Institute for Social Change Facilitative Leadership planning process.
Healthy Community Coalition of Greater Franklin County 105 Mt. Blue Circle, Suite #1 Farmington, ME 04938	\$20,000.00	\$20,000.00	\$0.00	PC	Uniting Franklin Forces for Better Health will address Food Security for low-income individuals and families in this rural region called Greater Franklin County. This initiative will unite groups from a variety of interests and sectors to discuss the best ways to reach the region's most vulnerable. Uniting Franklin Forces for Better Health will bring non-traditional partners, as well as community members who define the vulnerable population, to the table to discuss ways to incorporate local fresh foods, food availability and delivery to everyone in Franklin County.
Lincoln County Regional Planning Commission 35 Water Street P.O. Box 268 Wiscasset, Maine 04578	\$20,000.00	\$20,000.00	\$0.00	PC	Lincoln County Regional Planning Commission (LCRPC) will lead a consortium of health care, social services, community and economic development, and transportation partners to identify priority health issues and address the social, economic and environmental determinants of health. Using evidence-based assessment models, the consortium will adapt methods to reach, engage and empower diverse groups and individuals (vulnerable populations, the broader community, and other key stakeholders). This process will lead to identifying one (no more than 2) major health issues, and community-defined health outcomes to further guide our next phase of comprehensive planning and implementation.

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Maine Sea Coast Mission 127 West Street Bar Harbor, ME 04609	\$18,400 00	\$18,400 00	\$0 00	PC	The Maine Sea Coast Mission will conduct a one year comprehensive community health assessment of the seven islands it serves. The goal of this assessment will be to work together with the residents of these islands in identifying their communities priority health needs in order to address and provide solutions to these needs through long term sustainable community health programs
MaineGeneral Medical Center 35 Medical Center Parkway Augusta, ME 04330	\$20,000 00	\$20,000 00	\$0 00	PC	MaineGeneral will engage community members, especially low income community members, in a discussion about the important health issues that impact their lives and create a plan for improvement. We will utilize data collection methods, such as focus groups, interviews with key informants and survey tools. We will work with agencies who serve low income populations to reach them where they are and will offer incentives for their participation
Mount Desert Island Hospital 10 Wayman Lane Bar Harbor, ME 04609	\$19,731 00	\$19,731.00	\$0 00	PC	Utilizing service areas of three health care organizations--Mount Desert Island Hospital, Maine Coast Memorial Hospital, and Harrington Family Health Center, we will identify a representative community per service area and utilize community forums to listen to the community voice about needs and barriers to health services. Through a quantitative and qualitative approach, we will prioritize one or two health issues that we can integrate into an existing structure of patient centered medical home practices and community care teams to build connection to health and then evaluate these methods for effectiveness
Penobscot Bay YMCA 116 Union Street P O Box 840 Rockport, Maine 04856	\$19,999.00	\$19,999 00	\$0.00	PC	The goal of this project is to engage and empower all members of the community to foster a healthy environment for people to be born, age, play, work, and live. The project will include exploring the social determinants of health and their impact on health equity in Knox County. Community assets will be evaluated and opportunities for promoting the built environment assessed. The outcome of this initial stage of the project will be the identification of one-two priority health issues and milestones to measure success. The success of the project will be based on establishing and maintaining relationships with and among all community members, particularly those considered most vulnerable, as well as key stakeholders
Piscataquis Regional YMCA 48 Park St Dover-Foxcroft, Maine 04426	\$17,439 40	\$17,439 40	\$0 00	PC	Piscataquis Regional YMCA will take the lead in our Community Health Improvement Project (CHIP). CHIP will hire a part-time Facilitator who will form and work with a community panel. This panel will work towards community problem identification by reviewing previous studies and findings, input from partner organizations, meetings within stakeholder organizations to engage the vulnerable populations that they serve, and hosting both public forums and targeted discussions with specific populations

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Public Health Resource Institute 15 Clifford Street Portland, ME 04102	\$19,999.10	\$19,999.10	\$0.00	PC	The Washington County Network for Health and Wellness (WCN) is a recently-formed, HRSA-sponsored network of organizations and individuals working to improve the health and welfare of Washington County residents. WCN utilizes a community-based participatory process to inform the direction, purpose and focus of the network, especially from different populations residing in Washington County, currently this includes representatives from Passamaquoddy tribes, the elderly and youths. WCN members will continue to use this participatory process to understand the social, economic and health drivers that impact the health and well being of low-income households and vulnerable populations of Washington County as we develop the work plan for the group. This process, coupled with focus groups, town meetings, group trainings and similar methods will be used to identify 2-3 priority health issues for this grant effort.
Redington-Fairview General Hospital 46 Fairview Avenue P O. Box 468 Skowhegan, ME 04976	\$20,000.00	\$20,000.00	\$0.00	PC	The town of Jackman, Maine and its surrounding area is the community of focus for this project. The most vulnerable population for health issues are our senior citizens. Redington-Fairview will take a three step process for identifying and selecting 2 priority issues. First, the leadership team will identify a group of youth and an advisor and train them in the group interviewing process and interviewing protocol/skills. We will use local agency expertise from Spectrum Generations, Greater Somerset Public Health Collaborative (GSPHC) and Kennebec Behavioral Health (KBH) and contract the Hornby Zeller and Associates for assistance to plan and deliver the training. Secondly, we will establish a process which will allow the youth to interview our senior citizens. Finally, the results will be gathered and presented to the leadership team and a one day retreat will be organized to review the issues, receive education around the issues, select the priorities and plan next steps for the planning/implementation process.
Somali Culture And Development Association 107 Elm Street - Suite 100E P O Box 8676 Portland, ME 04101	\$20,000.00	\$20,000.00	\$0.00	PC	SCDA will convene African community groups in Greater Portland and mainstream providers to 1) meaningfully engage participants in facilitated conversation, 2) learn through presentations of existing health outcomes data (already collected), 3) engage with mainstream partners to inform identification of the top five issues, distilling down to the 1-2 issues of greatest concern, 4) deepen trust with mainstream providers, and 5) establish community ownership of priority health issues.

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
The Opportunity Alliance 50 Monument Square, 6th FloorPortland, ME 04101	\$20,000 00	\$20,000 00	\$0 00	PC	The Opportunity Alliance (TOA) will engage stakeholders in Cumberland County's Lakes Region to examine access to health care, social services, healthy foods and safe places to be physically active. The process will invite community members of all ages and backgrounds to consider the impact of access -- including the role of education, transportation and employment in supporting or diminishing health. TOA will convene a multi-sector leadership group to provide direction and capacity. This socially and economically diverse group will formulate questions and select participatory, action-oriented, culturally-appropriate strategies for gathering input from the larger community. By engaging in an inspired, stakeholder-led dialogue about access and health, we will emerge with agreement about the community's priority health issue.
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04101	\$20,000 00	\$20,000 00	\$0 00	PC	The Opportunity Alliance (TOA), working through its place-based Parkside Neighborhood Center community hub, will identify a group of stakeholders across multiple sectors and including populations such as New Americans, refugees, youth, homeless and the economically insecure, in order to engage in a conversation about health in the community and the factors that contribute to the social determinants of health. We will leverage existing resources and current collaborations, develop new partnerships, and meaningfully involve neighborhood residents in order to identify one or two health issues which will create the basis for a long term effort to measure and improve community health.
Western Maine Health Care Corporation 181 Main Street Norway, ME 04268	\$20,000 00	\$20,000.00	\$0 00	PC	Healthy Oxford Hills will lead a broad and growing coalition seeking to engage all sectors of the county, especially those typically excluded from health promotion discussions, in a process designed to build social capital, foster commitment and mutual accountability. This process intends to create lasting involvement in co-creating a future of aligned action on community health and wellness. The project begins with training local facilitators in a new methodology that will promote conversations around the county that are focused on possibilities rather than problems, gifts rather than deficits, and have the power to create a future distinct from the past.

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
York County Community Action Corporation P O. Box 72 Sanford, ME 04073	\$20,000 00	\$20,000 00	\$0 00	PC	In 2009, Sanford and eight contiguous communities were designated a Medically Underserved Population by the Health Resources & Services Administration, citing the area's "unusual local conditions," including high poverty and unemployment rates. YCCAC convened a countywide "community forum" to prompt conversations regarding locally unmet health needs. When HRSA announced the availability of funds to establish New Access Point community health centers nationwide, the forum refocused its efforts to support YCCAC's development of a strong application. Now, in 2013, YCCAC will reconvene and expand upon this forum in a comprehensive and organized manner, with the goal of identifying one-to-two locally pervasive health issue(s) and developing benchmarks to measure impact of our collaborative efforts
York Hospital 15 Hospital Dr York, ME 03909	\$18,300 00	\$18,300 00	\$0.00	PC	Choose To Be Healthy (CTBH) will engage a task force to identify a priority health need of community members with low literacy in the CTBH service area. We will work through a series of 6 World Cafe conversations where the participants will include at least 50% people attending literacy and English as a Second Language programs
Achieving Better Health in Communities - Other					
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04101	\$18,304 00	\$18,304 00	\$0 00	PC	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. The focus will be on youth, parents, caring adults, and community partners, with the goal that the entire West End neighborhood will be positively influenced by program 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

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Town of Bucksport, Maine P O Drawer X Bucksport, ME 04416	\$20,000 00	\$20,000 00	\$0 00	PC	The 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, and working to improve the cardiovascular health of local citizens. A structured training program will be provided for wellness guides, providing 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, Achieving Better Health in Communities Grant (22) Payments = \$431,652.50					
Leadership Development & Capacity Building					
Blue Cross and Blue Shield of Massachusetts Foundation, Inc Landmark Center 401 Park Drive M/S 01/04 Boston, MA, ME 02215	\$18,000 00	\$18,000 00	\$0 00	PF	The Blue Cross Blue Shield of Massachusetts Foundation Health Coverage Fellowship is designed to help print, radio, and television media do a better job covering critical health care issues. The first of its kind in the country, the Fellowship aims to enhance the awareness and knowledge of both the public and policy makers regarding critical health issues, especially those affecting the low-income and the uninsured, by intensively training medical journalists. The Fellowship curriculum features more than 70 top health officials, policy makers, and researchers as speakers. It also brings the fellows out to watch first-hand how the system works, from walking the streets at night with mental health case workers to riding a Medflight helicopter.
Center for Health Policy Development 10 Free Street Portland, ME 04101	\$13,305 42	\$13,305.42	\$0 00	PC	Sponsorship of legislative and health policy leaders from Maine to attend National Academy for State Health Policy's Health Policy Conference

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
Daniel Hanley Center for Health Leadership 217 Commercial Street, Suite 201 Portland, ME 04101	\$55,000 00	\$20,000 00	\$20,000.00	PC	This project will address serious health disparities that exist in communities across Maine, build and strengthen interdisciplinary teams that are providing integrated physical and behavioral health care services and those that are serving uninsured and MaineCare populations, and provide targeted tuition assistance to 4-6 health professionals each year (for a three year period) from organizations that serve populations that are negatively impacted by health disparities and/or are building integrated care teams aimed at improving the coordination and quality of care for patients
Maine Community Foundation, Inc. 245 Main StreetEllsworth, ME 04605	\$50,000 00	\$50,000.00	\$0 00	PC	Each year, the Maine Community Foundation's People of Color Fund (POCF) awards grants to organizations that serve communities of color in Maine, with a focus on those that have people of color in leadership positions and that work closely with communities of color. Our target populations include but are not limited to people of Native American, African, Asian, and Latino descent. MeHAF funding will offer additional grant support for projects that specifically address health and health care, access to and understanding of health care opportunities, as well as capacity building support for organizations working in these areas
Subtotal, Leadership Development & Capacity Building Grant (4) Payments = \$101,305.42					
Discretionary Grants					
American Cancer Society, New England Division 250 Williams Street NW Atlanta, GA 30303	\$2,000 00	\$2,000 00	\$0 00	PC	The American Cancer Society created the Living With Cancer Conference (LWCC) in 1979. Since then, cancer patients, survivors, family members, caregivers, and healthcare professionals come together to attend this annual event which focuses on offering hope, education and support with locations in throughout Maine
Aroostook Dental Clinic 122 Academy St., Suite A Presque Isle, ME 04769	\$7,856 00	\$7,856.00	\$0.00	PC	The dental clinic will purchase equipment to provide inhalation sedation. In addition the Clinic has recently added equipment for operatories and an exam/consultation room and is in need of computer workstations and phones for these areas. With growth, the Clinic requires a dedicated computer server

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
Calais Regional Hospital 24 Hospital Lane Calais, ME 04619	\$1,000.00	\$1,000.00	\$0.00	PC	Meeting support for a guest speaker for Patient Safety Awareness Week. This event will consist of speaker presentations and a networking event.
Cary Medical Center 163 Van Buren Rd Caribou, ME 04736	\$10,000.00	\$10,000.00	\$0.00	PC	The Diversion Alert Project will complete an implementation and sustainability plan for expansion of the Program for use by health care providers statewide, and evaluate outcomes from expansion of the Program to Penobscot, Washington and Hancock counties in order to inform the statewide plan.
Central Maine Community Health Corporation 300 Main St Lewiston, ME 04240	\$964.56	\$964.56	\$0.00	PC	Meeting support to assemble state and local organizations and agencies, including Lewiston-Auburn government, and stakeholders on approaches for healthy housing in Lewiston-Auburn. The Director of Green and Healthy Homes Initiative (GHHI) and a program manager will present on how GHHI addresses healthy housing issues.
City of Calais P.O. Box 413 Calais, ME 04619	\$4,750.00	\$4,750.00	\$0.00	PC	Grantee will purchase 3 portable radios and 5 pagers for emergency responders.
Community Dental 366 US Route 1 Falmouth, ME 01405	\$4,800.00	\$4,800.00	\$0.00	PC	Community Dental will host a one day training of its employees and key collaborators in order to increase knowledge regarding the challenges of providing oral health care to persons with disabilities. This knowledge will help to reduce the significant barriers to accessing oral health care confronting these individuals and their caregivers.
Community Partners, Inc 443 Main Street P.O. Box 363 Biddeford, Maine 04005	\$8,645.00	\$8,645.00	\$0.00	PC	In collaboration with UNE, Community Partners will develop an instructional video to demonstrate how the combination of visual aids and peer mentoring can improve communication with healthcare professionals, and ultimately, the medical outcomes for people with Intellectual and Developmental Disabilities (IDD).
Hand in Hand / Mano en Mano, Inc P.O. Box 573 Milbridge, ME 04658	\$2,000.00	\$2,000.00	\$0.00	PC	Starting with the information gathered during our 2011 Needs Assessment and Vision, Mano en Mano will develop three-year strategic and business plans that will revolve around long-term community impact and identifying ways that we can "work ourselves out of a job."

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
hear ME now! P O Box 896 Portland, ME 04104	\$7,500 00	\$7,500 00	\$0 00	PC	hear ME now's tele-therapy project provides internet access to underserved families of children with hearing loss who lack access because of financial or geographic constraints. This project will increase access to high quality speech language therapy by connecting individuals to specialists via live video conferencing.
Husson University One College Circle Bangor, ME 04401	\$2,000 00	\$2,000 00	\$0 00	PC	The goal of this program is the development of a collaborative healthcare learning community of providers in Bangor, ME, who treat women with the illness of addiction, many with concomitant domestic/sexual trauma. Dialogue will seek methods for culture change and an integrative approach to prevention, recovery and health
Kennebec Valley Organization 70 Pleasant St Waterville, ME 04901	\$5,000 00	\$5,000 00	\$0 00	PC	The Kennebec Valley Organization (KVO), acting as a catalyst and convener, has developed the End Elderly Isolation Campaign to address the needs of thousands of rural and small town seniors who do not have transportation to non-emergency health care or fresh food
LifeFlight of Maine 13 Main Street P.O. Box 899 Camden, ME 04843	\$2,000 00	\$2,000 00	\$0 00	PC	Meeting support for a collaborative conference intended to increase capacity for fundraising in a non-competitive manner for Maine's non-profit, non-municipal emergency medical service (EMS) agencies. Solutions to fundraising challenges faced by many of Maine's rural EMS agencies will be explored with a focus on collaboration and leveraging resources
Maine Center on Deafness 68 Bishop St., Suite 3 Portland, ME 04103	\$2,000 00	\$2,000.00	\$0 00	PC	Meeting support for the annual gathering of ~150 service providers, advocates, families, sign language interpreters and Maine people with hearing loss/deafness, to spend a day in community learning about this year's theme of wellness as it applies to people who need communication accommodation to access health care information
Maine Dental Health Out- Reach, Inc 676 Old Lewiston Road P O Box 275 Winthrop, ME 04364	\$3,463 00	\$3,463 00	\$0 00	PC	MDHO operates in a mobile van and offers dental hygiene services to children in 37 schools. MDHO will purchase a new autoclave, which sterilizes the dental instruments used on more than 600 students

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Maine Medical Education Trust P O Box 190 30 Association Drive Manchester, ME 04351	\$2,000.00	\$2,000.00	\$0.00	PC	Meeting support for a Portland conference for licensed medical professionals would be the first in Maine to bring prescribers and providers together to discuss addiction, recovery and prescribing practices. This issue impacts all Maine residents, whether personally, professionally, or economically. We are aiming to raise awareness for substance use illnesses and recovery issues.
Maine Medical Education Trust P O Box 19030 Association Drive Manchester, ME 04351	\$2,000.00	\$2,000.00	\$0.00	PC	Meeting support for an all-day program featuring Vincent Felitti, MD. He will discuss Adverse Childhood Experiences (ACE) and implications for adult physical and mental health, and issues of implementation. The audience will be primary care, pediatrics, juvenile justice, adult and child psychiatry and infant mental health providers.
Maine People's Resource Center 565 Congress St #200 Portland, ME 04101	\$10,000.00	\$10,000.00	\$0.00	PC	Maine People's Resource Center will craft polling questions, conduct polling, analyze and disseminate results to assess what Maine people know and think about the issue of accepting federal funds to cover more people under Medicaid. The results will be used to inform outreach and education efforts.
Maine Public Health Association 11 Parkwood Drive Augusta, ME 04330	\$1,000.00	\$1,000.00	\$0.00	PC	Meeting support for MPHA's fall conference held at the Augusta Civic Center. Regina Davis Moss, PhD, MPH, MCHES from American Public Health Association will be the keynote speaker discussing how integrated public health policy creates value on a local, state and national level and can be used as a strategy to address health equity.
Maine Women's Policy Center 124 Sewall St Augusta, ME 04330	\$1,000.00	\$1,000.00	\$0.00	PC	Meeting support for the Maine Women's Policy Center's Maine Women's Summit on Economic Security to convene and empower women from across the state in order to bring about the change needed to achieve economic security. Economic security affects every other aspect of a woman's life, particularly her health.
Portland Adult Education 14 Locust St. Portland, ME 04101	\$10,000.00	\$10,000.00	\$0.00	PC	Funding will support a pilot project to assist New Mainers who are skilled health professionals pursue their health careers in Maine. The MeHAF grant will pay travel costs for consultation/technical assistance from national model programs and an initial offering of courses targeted toward health professionals.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2013

01-0535144

Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
Portland Community Health Center 180 Park Avenue Portland, ME 04102	\$10,000.00	\$10,000.00	\$0.00	PC	Portland Community Health Center (Portland CHC) will leverage the support of the National Association of Community Health Centers in order to provide the much-needed expertise and support of a FQHC financial consultant, Holton Healthcare Consulting, for financial planning, policies, and direct transition assistance.
University of New England 11 Hills Beach Rd Biddeford, ME 04005	\$2,000.00	\$2,000.00	\$0.00	PC	Meeting support for the Maine Geriatrics Conference, which has expert speakers present evidenced-based and best practices in older adult and caregiver health and health policy to the full range of health and service providers, and others. This 2 day conference is the only geriatrics conference in Maine.
University of New Hampshire NH Institute for Health Policy and Practice 4 Library Way, Hewitt Hall Room 202 Durham, NH 03824	\$2,000.00	\$2,000.00	\$0.00	PC	Meeting support for "Advancing Change: Healthcare System Transformation in Northern New England". Topics include how data is used to drive system transformation, regional tools and learning, and funding system transformation efforts.
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	\$2,000.00	\$2,000.00	\$0.00	PC	Two Colloquia were held in April, 2013 at USM: (1) "Examining MaineCare Options Under the Affordable Care Act", featuring Sara Rosenbaum, George Washington University and Joseph Antos, AEI, and (2) "Vermont Reform: A case study", featuring Anya Wallack, Chair, Green Mountain Care Board. Both include panelists from Maine.
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	\$5,785.00	\$5,785.00	\$0.00	PC	The Diabetes and Antipsychotic Quality Improvement Project includes four mental health agencies in central Maine who will undertake quality improvement projects aimed at preventing diabetes among consumers with serious mental illness. Teams will collect data, identify consumers at risk, and review alternatives to prescribing antipsychotic medications.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2013

01-0535144

Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
Wabanaki Mental Health Association 157 Park Street, Suite 5 Bangor, ME 04401	\$2,000.00	\$2,000.00	\$0.00	PC	The Wabanaki Chiefs and Maine Governor authorized a Truth & Reconciliation Commission to learn the truth about child welfare practices with Wabanaki people, heal associated trauma, and recommend systems change. This two day event will seat the Commissioners and provide public education to initiate this ground-breaking work.
Subtotal, Discretionary Grant (13) & Meeting Support (14) Payments = \$113,763.50					
Charitable Gifts					
Maine Initiatives 295 Water Street, Suite 100 P O Box 2248 Augusta, ME 04338	\$5,000.00	\$5,000.00	\$0.00	PC	Sponsorship of the Maine Initiative's Watering Can awards, which honor Maine people for watering the roots of change, cultivating new ideas, providing the fertilizer to grow justice, changing public and private policies and practices, and inspiring others to act
Maine Initiatives 295 Water Street, Suite 100 P O Box 2248 Augusta, ME 04338	\$500.00	\$500.00	\$0.00	PC	Sponsorship for Maine Initiatives Funding Solutions
Maine Philanthropy Center USM Glickman Family Library P O Box 9301 Portland, ME 04104-9301	\$5,000.00	\$5,000.00	\$0.00	PC	A special gift of \$5000 to the Maine Philanthropy Center in honor of the retiring president's many years of leadership and her recent retirement
University of New England 11 Hills Beach Rd Biddeford, ME 04005	\$1,400.00	\$1,400.00	\$0.00	PC	Charitable gift in recognition of Board service
Subtotal, Charitable Gifts (4) Payments = \$11,900					
<i>Program contracts are italicized and highlighted yellow.</i>					

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 14
Year Ended December 31, 2013

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Organization	Grant Amount	Amount Paid in 2013	Balance	PF Code	Project Description
		Total Grants Paid in 2013			\$3,406,041.25
		Total Contracts Paid in 2013			\$212,067.00
		Total Charitable Gifts Paid in 2013			\$11,900.00
		Total Payments in 2013			\$3,630,008.25
		Total New Grant Awards (Newly allocated in 2013) = 98 grants = \$4,088,277.75			
		Grants Payable at Year End			
					\$1,945,314.20

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 are typically directed to individual program staff supervising the grant program. The responsible staff person is listed in each request for proposals (RFP) which are posted on the MeHAF web site (www.mehaf.org).

Line 2b: 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*, and they are posted and archived on the MeHAF website (www.mehaf.org). Each RFP provides explicit information on the submission requirements, application forms and other relevant project materials for major strategic programs and policy grants. All competitive grant rounds include one or more in-person or webinar-based applicant assistance meetings and/or technical assistance calls. Currently, all open competitive grants rounds are submitted via online application forms.

All grant funding is guided by the foundation's strategic plan, which was adopted by the MeHAF Board in April 2011. The four strategic priority areas for 2011 – 2016 are listed on the MeHAF website and below, with asterisks indicating the priorities within which new initiatives were roll-out in 2013. Calendar year 2013 represents the first year in which competitive grants were available under all of the strategic priorities listed below:

- *Advancing Health System Reform*
- *Promoting Patient-Centered Care**
- *Improving Access to Quality Care**
- *Achieving Better Health in Communities*

In 2013 five competitive RFPs were released and one set of renewal grants were completed. A total of 108 grants and contracts were approved.

MeHAF continues to use the model of convening grantees for regular meetings to share information and for "learning communities" at which experts share relevant information and research. Feedback from grantees indicates that this is viewed as helpful to their work and staff views this as among the most important things that MeHAF can do to ensure grantee success. In addition, Program Officers maintain regular contact with the directors of the grants they oversee (both competitive and foundation-initiated), often through regularly scheduled progress update calls, and generally after reviewing interim and final reports from grantees. Grants manager Cathy Luce holds regular webinar trainings on budgeting,

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 15
Year Ended December 31, 2013

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reporting, and on-line applications which have been recorded and are available to replay from the MeHAF website.

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 through the discretionary grants programs and foundation-initiated (invited) grants.

Line 2d: MeHAF is a mission-driven organization that provides funding to promote access, advance higher quality health care delivery, and help Maine people regain or preserve good health. The foundation 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.

It should be noted that in 2013, the MeHAF Board provided a grant to Maine Community Health Options, which is the state's new nonprofit CO-OP insurance plan. This entity falls within a new tax category of non-profit: the 501(c)(29). Significant research as well as consultation with MeHAF's legal counsel was needed to determine the appropriate mode of grantmaking and monitoring for this expenditure responsibility grant

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 16

Year Ended December 31, 2013

01-0535144

Part VII-B, Line 5c: Statement Required by Regs. Section 53-4945-5(d)

1. Name and address of grantee:

Blue Cross and Blue Shield of Massachusetts Foundation, Inc
The Landmark Center
401 Park Drive
Boston, MA 02215-3326

2. Date and amount of the grant:

Approval Date: 2/17/2012
Grant Amount: \$18,000
Grant Period: 4/27/2012 – 5/26/2013

3. Purpose of the grant:

The Health Coverage Fellowship Program is designed to help the New England media do a better job covering critical health care issues. The goal of the Fellowship is to deepen the media's understanding of the intricate and dynamic world of medicine and health care, with an emphasis on the special problems facing low-income and uninsured individuals and families. MeHAF funding is to insure that the program includes a Maine journalist

4. Amounts expended by the grantee (based on the most recent report):

Based on the final report received June 22, 2013, all grant funds (\$18,000) were expended.

5. Statement regarding fund diversion:

To the best of Maine Health Access Foundation's knowledge, the grantee has not diverted any portion of the fund from the purpose of the grant

6. Dates of any reports received from the grantee:

MeHAF received narrative and financial reports from the grantee on June 22, 2013. Reports (narrative and financial) from previous grants, have been received, reviewed and approved on a timely basis.

7. Dates and results of verification of grantee's reports:

Upon receipt of narrative and financial reports, the CEO reviewed and approved the reports from Blue Cross and Blue Shield of Massachusetts Foundation, and found grant funds were used appropriately.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 16

Year Ended December 31, 2013

01-0535144

Part VII-B, Line 5c: Statement Required by Regs. Section 53-4945-5(d)

1. Name and address of grantee:

Maine Community Health Options
70 Lincoln Street Suite 1-C
PO Box 1121
Lewiston, ME 04243

2. Date and amount of the grant:

Approval Date: 12/13/2012
Grant Amount. \$300,000
Grant Period. 1/1/2013 - 12/31/2013

3. Purpose of the grant:

This project encompasses a robust marketing and outreach effort to ensure that the Maine Community Health Option's (MCHO) target population of uninsured, underinsured and underserved are both aware of the opportunity for coverage through MCHO as a qualified health plan on the Exchange and have information on the availability of subsidies, cost sharing reductions and how to enroll. Despite MCHO's considerable start-up financing, none of the CMS loan funds can be used to market MCHO products. MeHAF funding will support direct marketing to potential consumers, primarily through paid advertising.

4. Amounts expended by the grantee (based on the most recent report):

Based on the final report received February 12, 2014, all grant funds (\$300,000) were expended.

5. Statement regarding fund diversion:

To the best of Maine Health Access Foundation's knowledge, the grantee has not diverted any portion of the fund from the purpose of the grant.

6. Dates of any reports received from the grantee:

MeHAF received narrative and financial reports from the grantee on February 14, 2014.

7. Dates and results of verification of grantee's reports:

Upon receipt of narrative and financial reports, the Vice President for Programs reviewed the reports from Maine Community Health Options.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 16

Year Ended December 31, 2013

01-0535144

Part VII-B, Line 5c: Statement Required by Regs. Section 53-4945-5(d)

1. Name and address of grantee:

Blue Cross and Blue Shield of Massachusetts Foundation, Inc
The Landmark Center
401 Park Drive
Boston, MA 02215-3326

2. Date and amount of the grant:

Grant #: 2013 FI-0004
Approval Date: 3/29/2013
Grant Amount: \$18,000
Grant Period: 4/26/2013 – 5/02/2014

3. Purpose of the grant:

The Health Coverage Fellowship Program is designed to help the New England media do a better job covering critical health care issues. The goal of the Fellowship is to deepen the media's understanding of the intricate and dynamic world of medicine and health care, with an emphasis on the special problems facing low-income and uninsured individuals and families. MeHAF funding is to insure that this ground-breaking journalist training program includes a Maine participant.

4. Amounts expended by the grantee (based on the most recent report):

The MeHAF grant is provided to BC BS of Massachusetts to offset the tuition costs that are incurred by a Maine journalist who is participating in the program

5. Statement regarding fund diversion:

To the best of Maine Health Access Foundation's knowledge, the grantee has not diverted any portion of the fund from the purpose of the grant.

6. Dates of any reports received from the grantee:

Narrative and financial reports were received May 27, 2014.

7. Dates and results of verification of grantee's reports:

Upon receipt of narrative and financial reports, the CEO reviewed the reports from Blue Cross and Blue Shield of Massachusetts Foundation, to ensure the appropriate use of grant funds. This review was completed July 2, 2014 and the final report was approved by Dr. Wolf.

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

► Information about Form 8868 and its instructions is at www.irs.gov/form8868

OMB No 1545-1709

- 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	Name of exempt organization or other filer, see instructions.	Enter filer's identifying number
File by the due date for filing your return. 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)

04

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 990-T (corporation)	07
Form 990-BL	02	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	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, 2014, to file the exempt organization return for the organization named above. The extension

is for the organization's return for:

► ☒ calendar year 2013 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 Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	3a	\$	324,282.
b If this application is for Forms 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	\$	174,282.
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	\$	150,000.

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