Extended to November 16, 2015

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

2014

Open to Public Inspection

For calendar year 2014 or tax year beginning , and ending

Name of foundation: Maine Health Access Foundation, Inc.

A Employer identification number: 01-0535144

Number and street (or P O box number if mail is not delivered to street address): 150 Capitol Street

Room/suite: 4

B Telephone number: (207) 620-8266

City or town, state or province, country, and ZIP or foreign postal code: Augusta, ME 04330

C If exemption application is pending, check here ▶☐

G Check all that apply ☐ Initial return ☐ Initial return of a former public charity ☐ Final return ☐ Amended return ☐ Address change ☐ Name change

D 1. Foreign organizations, check here ▶☐

2. Foreign organizations meeting the 85% test, check here and attach computation ▶☐

H Check type of organization ☒ Section 501(c)(3) exempt private foundation ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

E If private foundation status was terminated under section 507(b)(1)(A), check here ▶☐

I Fair market value of all assets at end of year *(from Part II, col. (c), line 16)* ▶$ 123,720,335.

J Accounting method ☐ Cash ☒ Accrual ☐ Other (specify) *(Part I, column (d) must be on cash basis.)*

F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ▶☐

Part I **Analysis of Revenue and Expenses** (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))

			(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1	Contributions, gifts, grants, etc , received	25,100.		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	1,881,013.	1,786,932.		
	5a	Gross rents				
	b	Net rental income or (loss)				
	6a	Net gain or (loss) from sale of assets not on line 10	7,542,305.			
	b	Gross sales price for all assets on line 6a 7,542,305.				
	7	Capital gain net income (from Part IV, line 2)		7,542,305.		
	8	Net short-term capital gain				
	9	Income modifications			18,593.	
	10a	Gross sales less returns and allowances				
	b	Less Cost of goods sold				
	c	Gross profit or (loss)				
	11	Other income	1,608.	<2,991,734.>		Statement 1
	12	**Total.** Add lines 1 through 11	9,457,526.	6,345,003.	18,593.	
Operating and Administrative Expenses	13	Compensation of officers, directors, trustees, etc	228,406.	8,000.		220,406.
	14	Other employee salaries and wages	648,665.	0.		648,665.
	15	Pension plans, employee benefits	128,146.	0.		128,146.
	16a	Legal fees Stmt 2	4,261.	0.		4,261.
	b	Accounting fees Stmt 3	43,518.	2,000.		41,518.
	c	Other professional fees				
	17	Interest				
	18	Taxes Stmt 4	139,484.	0.		59,484.
	19	Depreciation and depletion	16,922.	0.		
	20	Occupancy	95,590.	0.		95,590.
	21	Travel, conferences, and meetings	67,990.	0.		67,990.
	22	Printing and publications	16,813.	0.		16,813.
	23	Other expenses Stmt 5	1,791,828.	337,783.		1,378,270.
	24	**Total operating and administrative expenses.** Add lines 13 through 23	3,181,623.	347,783.		2,661,143.
	25	Contributions, gifts, grants paid	2,740,764.			2,793,012.
	26	**Total expenses and disbursements.** Add lines 24 and 25	5,922,387.	347,783.		5,454,155.
	27	Subtract line 26 from line 12				
	a	Excess of revenue over expenses and disbursements	3,535,139.			
	b	**Net investment income** (if negative, enter -0-)		5,997,220.		
	c	**Adjusted net income** (if negative, enter -0-)			18,593.	

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11-24-14 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2014)

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	44,353.	22,005.	22,005.
	2	Savings and temporary cash investments	11,730,823.	6,004,071.	6,004,071.
	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	42,476.	37,587.	37,587.
	10a	Investments - U S and state government obligations			
	b	Investments - corporate stock			
	c	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment: basis ▶			
		Less: accumulated depreciation ▶			
	12	Investments - mortgage loans			
	13	Investments - other Stmt 6	111,966,178.	116,809,341.	116,809,341.
	14	Land, buildings, and equipment: basis ▶ 295,836.			
		Less: accumulated depreciation ▶ 253,505.	47,469.	42,331.	42,331.
	15	Other assets (describe ▶ Statement 7)	750,000.	805,000.	805,000.
	16	**Total assets** (to be completed by all filers - see the instructions. Also, see page 1, item I)	124,581,299.	123,720,335.	123,720,335.
Liabilities	17	Accounts payable and accrued expenses	39,118.	110,004.	
	18	Grants payable	1,945,314.	1,893,066.	
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable			
	22	Other liabilities (describe ▶ Statement 8)	592,000.	514,000.	
	23	**Total liabilities** (add lines 17 through 22)	2,576,432.	2,517,070.	
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	122,004,867.	121,203,265.	
	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			
	30	**Total net assets or fund balances**	122,004,867.	121,203,265.	
	31	**Total liabilities and net assets/fund balances**	124,581,299.	123,720,335.	

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	122,004,867.
2	Enter amount from Part I, line 27a	2	3,535,139.
3	Other increases not included in line 2 (itemize) ▶ Refunded grants	3	18,593.
4	Add lines 1, 2, and 3	4	125,558,599.
5	Decreases not included in line 2 (itemize) ▶ Net unrealized loss on investments	5	4,355,334.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	121,203,265.

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	7,542,305.			7,542,305.
b				
c				
d				
e				

	Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col. (h))
	(i) F M V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a				7,542,305.
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	7,542,305.
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))
2013	5,477,994.	117,522,363.	.046612
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

2 Total of line 1, column (d)	2	.245928
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	.049186
4 Enter the net value of noncharitable-use assets for 2014 from Part X, line 5	4	122,201,113.
5 Multiply line 4 by line 3	5	6,010,584.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	59,972.
7 Add lines 5 and 6	7	6,070,556.
8 Enter qualifying distributions from Part XII, line 4	8	5,454,155.

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 Date of ruling or determination letter ________ (attach copy of letter if necessary-see instructions)				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ▶ ☐ and enter 1% of Part I, line 27b			1	119,944.
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	119,944.
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	119,944.
6	Credits/Payments:				
a	2014 estimated tax payments and 2013 overpayment credited to 2014	6a	188,240.		
b	Exempt foreign organizations - tax withheld at source	6b			
c	Tax paid with application for extension of time to file (Form 8868)	6c	90,000.		
d	Backup withholding erroneously withheld	6d			
7	Total credits and payments Add lines 6a through 6d			7	278,240.
8	Enter any **penalty** for underpayment of estimated tax Check here ☐ if Form 2220 is attached			8	
9	**Tax due.** If the total of lines 5 and 8 is more than line 7, enter **amount owed** ▶			9	
10	**Overpayment.** If line 7 is more than the total of lines 5 and 8, enter the **amount overpaid** ▶			10	158,296.
11	Enter the amount of line 10 to be **Credited to 2015 estimated tax** ▶	158,296.	**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?	1a		X
b	Did it spend more than $100 during the year (either directly or indirectly) for political purposes (see instructions for the definition)?	1b		X
	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.			
c	Did the foundation file **Form 1120-POL** for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation ▶ $ 0. (2) On foundation managers ▶ $ 0.			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ▶ $ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? *If "Yes," attach a detailed description of the activities.*	2		X
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? *If "Yes," attach a conformed copy of the changes*	3		X
4a	Did the foundation have unrelated business gross income of $1,000 or more during the year?	4a	X	
b	If "Yes," has it filed a tax return on **Form 990-T** for this year?	4b	X	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? *If "Yes," attach the statement required by General Instruction T.*	5		X
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: ● By language in the governing instrument, or ● By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?	6	X	
7	Did the foundation have at least $5,000 in assets at any time during the year? *If "Yes," complete Part II, col. (c), and Part XV*	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶ ME			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by *General Instruction G? If "No," attach explanation*	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? *If "Yes," complete Part XIV*	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		X

Form **990-PF** (2014)

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?	13	X	

Website address ▶ www.mehaf.org

14 The books are in care of ▶ Wendy J. Wolf, M.D., M.P.H. Telephone no ▶ (207) 620-8266

Located at ▶ 150 Capitol Street, Suite 4, Augusta, ME ZIP+4 ▶ 04330

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

		Yes	No
16 At any time during calendar year 2014, 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?	16		X
See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22 1) If "Yes," enter the name of the foreign country ▶			

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

		Yes	No
File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			
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)?	1b		X
Organizations relying on a current notice regarding disaster assistance check here ▶ ☐			
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 2014?	1c		X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2014? ☐ Yes ☒ No			
If "Yes," list the years ▶ ______, ______, ______, ______			
b Are there any years listed in 2a for which the foundation is **not** applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to **all** years listed, answer "No" and attach statement - see instructions.) N/A	2b		
c If the provisions of section 4942(a)(2) are being applied to **any** of the years listed in 2a, list the years here ▶ ______, ______, ______, ______			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? ☐ Yes ☒ No			
b If "Yes," did it have excess business holdings in 2014 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 2014.)* N/A	3b		
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		X

Form **990-PF** (2014)

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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 4945(d)(4)(A)? (see instructions) ☒ 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)? **5b** X (No)

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? **6b** X (No)

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 **7b**

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

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

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
See Statement 9		207,192.	21,214.	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	127,890.	17,235.	0.
Leonard Bartel 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	74,473.	20,606.	0.
Becky Hayes Boober 150 Capitol Street, Augusta, ME 04330	Sr. Program Officer 40.00	87,838.	7,036.	0.
Catherine Luce 150 Capitol Street, Augusta, ME 04330	Grant Manager 37.50	66,952.	15,621.	0.
Charles Dwyer 150 Capitol Street, Augusta, ME 04330	Program Officer 40.00	68,242.	12,273.	0.

Total number of other employees paid over $50,000 ▶ 0

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	80,881.
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.	2,661,142.
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	
All other program-related investments See instructions 3	
Total. Add lines 1 through 3 ▶	0.

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	124,056,972.
b	Average of monthly cash balances	1b	5,072.
c	Fair market value of all other assets	1c	
d	**Total** (add lines 1a, b, and c)	1d	124,062,044.
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	124,062,044.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	1,860,931.
5	**Net value of noncharitable-use assets.** Subtract line 4 from line 3 Enter here and on Part V, line 4	5	122,201,113.
6	**Minimum investment return.** Enter 5% of line 5	6	6,110,056.

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	6,110,056.
2a	Tax on investment income for 2014 from Part VI, line 5 — 2a: 119,944.		
b	Income tax for 2014 (This does not include the tax from Part VI) — 2b: 15,058.		
c	Add lines 2a and 2b	2c	135,002.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	5,975,054.
4	Recoveries of amounts treated as qualifying distributions	4	18,593.
5	Add lines 3 and 4	5	5,993,647.
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	5,993,647.

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	5,454,155.
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	5,454,155.
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	5,454,155.

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.

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11-24-14

Part XIII **Undistributed Income** (see instructions)

	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI, line 7				5,993,647.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			5,328,031.	
b Total for prior years ______ , ______ , ______		0.		
3 Excess distributions carryover, if any, to 2014				
a From 2009				
b From 2010				
c From 2011				
d From 2012				
e From 2013				
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2014 from Part XII, line 4 ▶ $ 5,454,155.				
a Applied to 2013, but not more than line 2a			5,328,031.	
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 2014 distributable amount				126,124.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2014 (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 2013 Subtract line 4a from line 2a Taxable amount - see instr			0.	
f Undistributed income for 2014. Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015				5,867,523.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions)	0.			
8 Excess distributions carryover from 2009 not applied on line 5 or line 7	0.			
9 **Excess distributions carryover to 2015.** Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9				
a Excess from 2010				
b Excess from 2011				
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling .... ▶

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☐ 4942(j)(5)

	Tax year	Prior 3 years			
	(a) 2014	(b) 2013	(c) 2012	(d) 2011	(e) Total
2 a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the foundation had $5,000 or more in assets at any time during the year-see instructions.)

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than $5,000) (See section 507(d)(2))

None

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

None

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here ▶ ☐ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed

See statement 15

b The form in which applications should be submitted and information and materials they should include

See statement 15

c Any submission deadlines

See statement 15

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors.

See statement 15

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	2,796,612.
Total			▶ 3a	2,796,612.
b *Approved for future payment*				
See statement 14	N/A	See Statement 14	Enhance health care in Maine	1,893,066.
Total			▶ 3b	1,893,066.

Part XVI-A Analysis of Income-Producing Activities

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) Exclusion 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	94,081.	14	1,786,932.	
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	7,542,305.	
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue					
a See Statement 10				1,608.	
b					
c					
d					
e					
12 Subtotal Add columns (b), (d), and (e)		94,081.		9,338,345.	0.

13 Total. Add line 12, columns (b), (d), and (e) . . . 13 9,432,426.

(See worksheet in line 13 instructions to verify calculations)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes)
11	All revenue is used to promote affordable and quality healthcare for
	Maine people. Please see statement 14.

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

			Yes	No
1	Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?			
a	Transfers from the reporting foundation to a noncharitable exempt organization of:			
	(1) Cash	1a(1)		X
	(2) Other assets	1a(2)		X
b	Other transactions			
	(1) Sales of assets to a noncharitable exempt organization	1b(1)		X
	(2) Purchases of assets from a noncharitable exempt organization	1b(2)		X
	(3) Rental of facilities, equipment, or other assets	1b(3)		X
	(4) Reimbursement arrangements	1b(4)		X
	(5) Loans or loan guarantees	1b(5)		X
	(6) Performance of services or membership or fundraising solicitations	1b(6)		X
c	Sharing of facilities, equipment, mailing lists, other assets, or paid employees	1c		X

d If the answer to any of the above is "Yes," complete the following schedule Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received

(a) Line no	(b) Amount involved	(c) Name of noncharitable exempt organization	(d) Description of transfers, transactions, and sharing arrangements
		N/A	

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

b If "Yes," complete the following schedule

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

Sign Here

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

▶	9/29/15	▶ PRESIDENT & CEO
Signature of officer or trustee	Date	Title

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

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self- employed	PTIN
E. Drew Cheney	E. Drew Cheney	09/29/15		P00182972

Firm's name ▶ Baker Newman & Noyes

Firm's EIN ▶ 01-0494526

Firm's address ▶ Box 507
Portland, ME 04112

Phone no (207) 879-2100

Form 990-PF (2014)

423622
11-24-14

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

2014

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, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

☐ For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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 totaling $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).

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.)
2	Tufts Medical Center 800 Washington Street Boston, MA 02111-1533	$ 18,000.	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.)

Name of organization

Maine Health Access Foundation, Inc.

Employer identification number

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
		$	

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

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

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

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

(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., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than $1,000 for the year from any one contributor. 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 info. 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

(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

(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

(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

Form 990-PF Other Income Statement 1

Description	(a) Revenue Per Books	(b) Net Investment Income	(c) Adjusted Net Income
Expense reimbursements	1,458.	0.	
Net adjustment for investment income on schedules K-1	<2,991,734.>	<2,991,734.>	
(not recorded on books)	2,991,734.	0.	
Honorarium	150.	0.	
Total to Form 990-PF, Part I, line 11	1,608.	<2,991,734.>	

Form 990-PF Legal Fees Statement 2

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Legal	4,261.	0.		4,261.
To Fm 990-PF, Pg 1, ln 16a	4,261.	0.		4,261.

Form 990-PF Accounting Fees Statement 3

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Accounting	43,518.	2,000.		41,518.
To Form 990-PF, Pg 1, ln 16b	43,518.	2,000.		41,518.

Form 990-PF Taxes Statement 4

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Excise taxes	80,000.	0.		0.
Payroll taxes	59,484.	0.		59,484.
To Form 990-PF, Pg 1, ln 18	139,484.	0.		59,484.

Form 990-PF Other Expenses Statement 5

Description	(a) Expenses Per Books	(b) Net Investment Income	(c) Adjusted Net Income	(d) Charitable Purposes
Office supplies & expenses	26,622.	0.		26,622.
Website	12,738.	0.		12,738.
Insurance	18,675.	0.		18,675.
Telecommunications	10,318.	0.		10,318.
Investment fees	337,783.	337,783.		0.
Program related expenses: contracts	850,449.	0.		850,449.
Program related expenses: consultants	86,884.	0.		86,884.
Program related expenses: conferences	8,543.	0.		8,543.
Program related expenses: grant management	21,898.	0.		21,898.
Program related expenses: communications	98,470.	0.		98,470.
Program related expenses: technical assistance	155,384.	0.		155,384.
Program related expenses: other	24,022.	0.		24,022.
Program related expenses: evaluation	96,618.	0.		96,618.
Program related expenses: needs assessment	39,324.	0.		39,324.
Retirement Plan Administration	4,100.	0.		4,100.
Accrual to cash conversion	0.	0.		<75,775.>
To Form 990-PF, Pg 1, ln 23	1,791,828.	337,783.		1,378,270.

Form 990-PF Other Investments Statement 6

Description	Valuation Method	Book Value	Fair Market Value
Vanguard Inflation Protected	FMV	3,485,901.	3,485,901.
Vanguard Long Term Treasury	FMV	4,221,876.	4,221,876.
Vanguard Total Stock Market Index	FMV	15,312,677.	15,312,677.
Vanguard MSCI Emerging Market	FMV	4,610,224.	4,610,224.
Adage Capital Partners	FMV	17,260,074.	17,260,074.
Artisan Midcap Growth Fund	FMV	3,929,147.	3,929,147.
Colchester Global LP	FMV	5,727,112.	5,727,112.
Silchester International Tobacco Free	FMV	15,288,031.	15,288,031.
Archstone Market	FMV	10,606,074.	10,606,074.
Adamas Opportunities, L.P.	FMV	10,089,279.	10,089,279.
FPA Crescent Fund	FMV	4,422,336.	4,422,336.
Vanguard Total International	FMV	7,026,302.	7,026,302.
Wellington CTF Commodities	FMV	3,592,726.	3,592,726.
RS Global Natural Resources Fund	FMV	3,274,266.	3,274,266.
Voya Global Real Estate Fund 2	FMV	4,736,595.	4,736,595.
Parametric Emerging Markets 2	FMV	3,226,721.	3,226,721.
Total to Form 990-PF, Part II, line 13		116,809,341.	116,809,341.

Form 990-PF Other Assets Statement 7

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	0.	55,000.	55,000.
To Form 990-PF, Part II, line 15	750,000.	805,000.	805,000.

Form 990-PF Other Liabilities Statement 8

Description	BOY Amount	EOY Amount
Deferred tax liability	575,000.	514,000.
Taxes payable	17,000.	0.
Total to Form 990-PF, Part II, line 22	592,000.	514,000.

Form 990-PF Part VIII - List of Officers, Directors Trustees and Foundation Managers Statement 9

Name and Address	Title and Avrg Hrs/Wk	Compen- sation	Employee Ben Plan Contrib	Expense Account
Wendy J. Wolf, MD, MPH 150 Capitol Street, Suite 4 Augusta, ME 04330	President & CEO 40.00	207,192.	21,214.	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.
Lisa Sockabasin, BSN 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 1.00	0.	0.	0.
Shirley Weaver, PhD 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 3.00	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.
John Benoit 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 1.00	0.	0.	0.
Deborah Deatrick, MPH 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Catherine Ryder, LCPC ACS 150 Capitol Street, Suite 4 Augusta, ME 04330	Trustee 2.00	0.	0.	0.
Totals included on 990-PF, Page 6, Part VIII		207,192.	21,214.	0.

Form 990-PF Other Revenue Statement 10

Description	Bus Code	Unrelated Business Inc	Excl Code	Excluded Amount	Related or Exempt Function Income
Expense reimbursements			01	1,458.	
Net adjustment for investment income on schedules K-1				<2,991,734.>	
(not recorded on books)				2,991,734.	
Honorarium				150.	
Total to Form 990-PF, Pg 12, ln 11				1,608.	

MAINE HEALTH ACCESS FOUNDATION 01-0535144
FORM 990-PF: SUPPLEMENTAL STATEMENT 11 12/31/2014

THIS STATEMENT IS INTENTIONALLY LEFT BLANK.

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

01-0535144
12/31/2014

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

01-0535144
12/31/2014

PART I, LINE 19 & PART II, LINE 14

	COST	DEPREC.	A/D
FURNITURE & EQUIPMENT	295,836	16,922	253,505

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, governed by a 15-member statewide Board of Trustees with input from a statewide Community Advisory Committee. 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 mission is *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 program funds are especially directed toward initiatives and projects that focus on more vulnerable people.

MeHAF provides approximately $4 million in grant and program support each year to achieve its mission. The majority of our current grant and programs focus on:

- ***Access for All***: Everyone in Maine deserves access to a basic level of quality health care services. MeHAF promotes options for affordable coverage, particularly for lower-income Mainers.
- ***Better Care***: The foundation works with public and private payers to support payment and health care delivery reform to improve quality and control the rising cost of care.
- ***Improving Health:*** Through our Healthy Community grant program, MeHAF is supporting a broad consortium of communities who are working across sectors to build a community-based culture of health.

Since 2002, MeHAF has awarded over $57 million in grants and program support so that 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. Our intent is to drive long-term, broad scale systemic improvements in health and health care delivery but grant funding alone is insufficient to spread successful strategies or innovative models to the tipping point of wide-scale adoption.

To accomplish this type of long-term change, we have become more directly engaged and embedded in the work of grantees to help connect, leverage and strengthen their efforts. For example, MeHAF convenes 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 their work.

In this summary of the foundation's 2014 activities, we highlight the impact of this deep partnership with our nonprofit and governmental partners, including such activities as:

- Informing Maine people about the health insurance options available under the Affordable Care Act by creating ***enroll207.com***, a Maine-specific gateway to the Affordable Care Act Health Insurance Marketplace;
- Working with the Maine Department of Health and Human Services to pilot their new Behavioral Health Homes model;
- Supporting a new "Thriving in Place" initiative to bring health care and community-based organizations together to improve coordination, efficiency and care for people in local communities who live with chronic illness so they can retain their health and live independently; and
- Supporting a broad consortium of communities who are working across sectors to build a culture of health through the Healthy Community Grants program.

In 2014, 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 2014.

Spreading the word about the Health Insurance Marketplace

The passage of the ACA (also known as Obamacare) in 2010 provided an unprecedented opportunity to expand coverage and access to care. For four years MeHAF has supported a varied group of organizations around the state to provide education and outreach assistance to Maine people on all aspects of the ACA.

When the Health Insurance Marketplace was poised to open in October, 2013, MeHAF grantees ramped up efforts to include enrollment assistance. MeHAF complemented their work by underwriting a statewide multimedia marketing campaign and website using the "enroll207.com" brand. MeHAF also partnered with three regional Chambers of Commerce to educate and inform Maine small businesses on the ACA's Small Business Health Options program.

In developing the enroll207.com website and campaign, MeHAF listened and responded to input from grantees on how critical it would be for many uninsured and underserved people to find and connect with trusted community organizations to complete the enrollment process.

At the end of the first open enrollment period, grantees and assisters noted just how important it was to share the stories of Maine people enrolling in the Marketplace to motivate others. One assister from Downeast Maine recounted that it was initially difficult to convince skeptical lobstermen in her community to look at Marketplace options, but after a leader in the lobstering community enrolled successfully, his word-of-mouth story about his own experience spurred many others to take a second look and enroll.

The word-of-mouth stories shared by many MeHAF grantees helped shape a primary theme of the enroll207.com campaign for the second year of open enrollment. MeHAF worked closely with grantees and Maine assisters to develop a comprehensive marketing campaign using TV, radio, social media, radio interviews, and print ads to encourage Mainers to "Get Covered or Stay Covered." The campaign featured the personal stories of ten Maine people from Machias to Portland who shared their story of why having health insurance was so important.

MeHAF grantees and assisters developed a plain language guide in English to help newly-insured Mainers get the most from their new health insurance benefits. Grantees were eager to have the guide translated for Maine's immigrant, refugee and migrant populations. MeHAF supported the translation of the booklet into Spanish, French, Somali, Arabic and Creole and worked with enroll207.com partner, Burgess Advertising, to have them printed for broad distribution around the state. The guide is also being used as a model in other states around the country.

The tremendous efforts of Maine's network of assisters and MeHAF grantees, supported by the enroll207.com campaign and stories of Maine people getting covered, resulted in just over 60 percent of eligible Mainers signing up for coverage – a record-breaking 75,000 people.

Putting the patient at the center of payment reform

Provisions of the Affordable Care Act and changes in payment advanced by private and public payers are leading toward aligning payment with the delivery of higher quality care and better health outcomes. MeHAF's Payment Reform initiative worked with grantees through three successive rounds of multi-year grants to accelerate efforts in Maine to move away from traditional fee-for-service payments. Our funding was aimed at ensuring that the needs of uninsured and underserved people were included in the broad system improvements and payment reform activities happening across the state.

The grantee cohort included a diverse group of projects ranging from efforts to improve payment and health information systems, to projects aimed at re-imagining primary care and re-engaging patients in their own care. With the last round of the Payment Reform grants concluding in 2014, grantees have significant tangible accomplishments. But even more lasting may be what grantees and MeHAF have learned from immersing themselves in the work together.

By listening to diverse stakeholders – and to each other at regular meetings hosted by MeHAF – and being open to learning from the experiences of others, the grantees and MeHAF reinforced their commitment to the principle put forth in the Institute of Medicine's 2001 Crossing the Quality Chasm: to be successful, any effort to transform our health care payment system must always keep the patient at the center of care.

Samples of grantee activities include:

- **Eastern Maine Health Systems** examined whether care management strategies would reduce unnecessary health care costs and utilization and increase patient satisfaction within Patient Centered Medical Homes, especially for uninsured and underserved patients using the walk-in-clinic.
- **MaineHealth's** project involved developing a new, data-driven model of primary care practice redesign and reimbursement aligned with principles of Patient Centered Medical Homes that could be replicated by providers within and outside of the MaineHealth network.
- **Franklin Memorial Hospital's** project delved into learning more about their patients who received free care to create both a better system for patient care and support and to stem financial losses.

Harnessing the strengths of community members to help neighbors thrive in place

Maine is facing a rapid increase in the proportion of residents with chronic health conditions. In response, MeHAF launched the Thriving in Place (TiP) initiative in 2014 to support communities working together to create local solutions to address this critical issue. Since Maine is the state with the oldest median age and one of the highest rates of disability in the nation, the need to help older adults and those with chronic conditions thrive in place touches almost every family and household in our state.

Throughout the first year of TiP, grantees listened to and learned about the needs and wishes of people from all walks of life in their communities through forums, interviews and surveys. Grantees also convened regular meetings with partner organizations and a diverse group of volunteers to build trust and develop community plans to coordinate needed health care and social services.

By listening closely to everyone at the table, surprising insights began to emerge. Instead of just receiving services, many people wanted to reciprocate to help the project succeed. Grantees also learned that often it is the easy access to assistance with everyday needs, like minor home repairs and social interaction, that can be a tipping point between thriving in place and the need for institutional care.

Some of the eight TiP grantees are incorporating these insights into the next phase of their work by, among other things, expanding existing volunteer networks to help neighbors stay at home. The TiP work is closely linked with the Maine Aging Initiative, a statewide effort engaging a broad array of stakeholders to create a more age-friendly Maine.

Advancing at the speed of trust to improve community health

MeHAF's goal is to improve the health of all members of a community, especially those who are uninsured and underserved, by bringing together people from multiple sectors to transform communities into more supportive environments that help people live healthier lives. Improving community health is a complex issue that requires much more than ensuring that people can visit their doctor or go to the hospital when they're sick. The availability of fresh foods, school lunch quality, adequate housing, transportation, and many other factors contribute to a community that supports people's efforts to maintain or improve health.

To tackle this issue, communities need time to cultivate and nurture trusting relationships with people from diverse backgrounds and among organizations from many sectors. That's why MeHAF designed Healthy Communities to begin with grants that supported a twelve-month pre-planning process.

Six months into the pre-planning work, the twenty Healthy Communities grantees told us that twelve months just wasn't enough time to foster the kind of deep engagement, robust participation, and most important, trust that is critical for this work. MeHAF responded by giving grantees an additional six months with more funding to support them in continuing to reach out so that even the 'quietest' voices in the community were included.

Grantees have used this extra time well. As one grantee put it, "The additional time and resources that MeHAF provided were pivotal to engaging community members in developing shared language for the work, and was essential in helping our community move beyond individual self-interest to the well-being of the whole community."

By listening and learning from our grantees, MeHAF was able to be flexible and responsive on program timelines – essential for the success of local efforts that can only move forward "at the speed of trust."

These projects represent examples of how MeHAF deploys an array of strategies to advance our work. In 2014, 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 2014.

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Program contracts are italicized and highlighted yellow.					
Advancing Health System Reform - Education, Outreach & Enrollment					
Consumers for Affordable Health Care Foundation 12 Church Street PO Box 2490 Augusta, ME 04338-2490	$175,000 00	$87,500.00	$87,500 00	PC	Consumers for Affordable Health Care (CAHC) will support a robust ACA outreach and enrollment system in Maine, thus enrolling as many uninsured and underinsured Mainers in coverage as possible, both during the Marketplace Open Enrollment Period (OEP) and through Special Enrollment Periods (SEPs) Ultimately, this will help more Mainers access quality coverage and thus improve their overall health CAHC will provide ongoing resources and support to Maine's navigators, certified application counselors, MeHAF outreach grantees, and other health professionals, therefore expanding their capacity and allowing them to enroll more consumers CAHC will continue to help consumers understand and navigate health coverage, primarily through the Consumer Assistance HelpLine, and will provide outreach to priority communities and populations not targeted by other assisters, including young adults and small business owners
Advancing Health System Reform - Advocacy					
Consumers for Affordable Health Care Foundation 12 Church Street PO Box 2490 Augusta, ME 04338-2490	$150,000 00	$75,000 00	$0.00	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 66 Winthrop Street PO Box 437 Augusta, ME 04330	$135,000 00	$70,000 00	$0 00	PC	MECEP will advocate to ensure that Maine accepts federal health care funds to provide affordable access to critical health services 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
Maine Equal Justice Partners 126 Sewall Street Augusta, ME 04330	$149,042 00	$74,714 00	$0.00	PC	Maine Equal Justice Partners will conduct advocacy to ensure successful implementation and administration of ACA Medicaid and Marketplace components that affect people with low incomes

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Maine Medical Education Trust P.O. Box 190 30 Association Drive Manchester, ME 04351	$133,975.00	$66,987 50	$0 00	PC	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 St. #200 Portland, ME 04101	$100,000.00	$50,000 00	$0.00	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					
The Aroostook Medical Center 140 Academy Street PO Box 151 Presque Isle, ME 04769	$193,642 00	$95,791 00	$0 00	PC	The Aroostook Medical Center (TAMC) will develop a community-wide program, the Northern Maine Advanced Medical Home Collaborative, to address extremely high admission rates, Emergency Dept (ED) and Walk-In Care (WIC) visits in Aroostook County The program will identify high-use patients without a primary care provider or with limited primary care engagement Patients will be supported to stay connected with primary care and will be part of program development and planning
Eastern Maine Medical Center One Cumberland Place, Suite 300 Bangor, ME 04401-5090	$187,641 00	$97,084 00	$0 00	PC	Building upon the Bangor Beacon Community (BBC) project, Eastern Maine Medical Center proposes to demonstrate that engaging uninsured and underinsured patients within Patient-Centered Medical Homes (PCMH) will be sustainable (Return of Investment analysis) within an Accountable Care Organization (ACO) environment, to explore how patient activation. a) improves the quality of care, b) improves the patient's experience, and c) reduces health care costs, and to determine which interventions are effective to activate patients within a PCMH
Franklin Memorial Hospital 111 Franklin Health Commons Farmington, ME 04938	$197,818.40	$98,909 20	$0.00	PC	Franklin Memorial Hospital (FMH) proposes to implement Franklin C.A.R E.S., a Nurse Navigator pilot program to improve care coordination, access to primary and specialty care and integration of behavioral health care for uninsured and underinsured patients offered specifically to those patients qualifying for free or discounted care under FCHN/FMH's Financial Assistance policy. FMH will establish a Consumer Advisory Council to inform the process, assess barriers and service gaps and to assist in the evaluation of the pilot program

[illegible]	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Maine Health Management Coalition Foundation 11 Bowdoin Mill Island, Suite 260 Topsham, ME 04086	$75,000.00	$25,000 00	$0 00	PC	MHMC Foundation will continue the following, an Accountable Care Implementation (ACI) committee supporting organizations transforming to Accountable Care Organizations (ACOs); an ACO Resource Center link on our website; annual Symposia, affinity groups providing peer-to-peer support for aspects of ACO development; developing a common statewide set of performance measures and targets for QI and cost reduction; An added focus area for continuation funding will be supporting our convening efforts to achieve cost reductions in one or more identified priority areas.
Maine Medical Education Trust P O Box 190 30 Association Drive Manchester, ME 04351	$189,888.00	$94,944 00	$0.00	PC	The Maine Medical Education Trust (MMET) seeks to assist physician practices in understanding and engaging in payment reform efforts. The MMET will contract with the Maine Medical Association (MMA) to educate physicians about shared savings and Accountable Care Organization (ACO) models, global payments, bundled payments and pay-for-performance strategies using webinars, newsletter articles and the MMA website The MMA will also provide physician practices with the tools and resources necessary to participate in payment reform, will provide physicians the support they need to be leaders in payment reform by hosting four regional education and networking forums, and will reestablish its Payer Liaison Committee
Maine Quality Counts PO Box 16 Manchester, ME 04351	$74,985 75	$24,989 50	$0.00	PC	Maine Quality Counts seeks to continue the Maine Patient-Centered Medical Home (PCMH) Pilot - Community Care Teams (CCT) initiative As part of Medicare's Multi-Payer Advanced Primary Care Practice (MAPCP) Demo, CCTs were introduced in 2011 as a key strategy for improving care and reducing avoidable costs for high-cost, high-need patients in the 26 PCMH Pilot practices CCTs coordinate and connect patients to additional health care and community resources in order to support their health improvement goals, achieve better health outcomes and reduce avoidable costs. CCTs work with PCMH Pilot practices to identify patients at high risk and/or with high utilization who need additional support and link them to resources in the health care environment or the community.
MaineGeneral Medical Center 35 Medical Center Parkway Augusta, ME 04330	$75,000 00	$25,000 00	$0 00	PC	Based on knowledge gained through primary care practice efforts, MaineGeneral Medical Center (MGMC) will grow patient engagement as a key component of medical home and health care reform initiatives by extending the patient and family advisor role through development of patient peer navigators These navigators, dealing with chronic disease themselves, will draw on their own experience and be trained to support other vulnerable patients Recruited by practices and the hospital's Prevention Center staff and working closely with patient advisory councils, they will be trained and supported by MaineGeneral Prevention Center's staff and Volunteer Services to work with leaders of evidence-based chronic disease prevention programs

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
MaineHealth 110 Free Street Portland, ME 04101	$196,200.00	$97,900 00	$0 00	SO III FI	Rapid identification and implementation of an alternative to fee-for-service reimbursement - particularly in primary care - is critical to unlock the capability of health care systems to deliver patient-centered care aligned with the Triple Aim. MaineHealth's Accountable Care Organization (ACO) and the Maine Medical Center (MMC) Physician-Hospital Organization (PHO) propose to collaborate with physicians, administrators, and commercial and public insurers to develop and successfully implement a new model of primary care reimbursement that· 1) aligns with principles of PCMHs and Healthcare 3 0, 2) has maximum potential for rapid implementation throughout the MaineHealth system and for integration in MaineHealth payer contracts, 3) can be replicated by other providers and ACOs in Maine and nationally; and 4) has no unintended negative consequences on the uninsured and/or medically underserved
Medical Care Development 11 Parkwood Drive Augusta, ME 04330	$75,000 00	$25,000.00	$0 00	PC	The Somerset microwellness initiative demonstrated that very small businesses can pool efforts to join in activities that align wellness and coverage Medical Care Development will (1) Partner with the Maine Development Foundation's Downtown Center to offer an adaptation of the Somerset County activity to two of its existing downtown organizations With "Healthy Maine Streets," we will demonstrate that existing downtown development groups can provide support to members so that they can implement wellness in very small workplaces, (2) Continue to collaborate with regulators and carriers so that the community-based workplace wellness model, including financial incentives, is included in coverage offered under health reform, and (3) Work with clinical leadership from Greater Somerset Public Health Collaborative on a plan to mitigate emerging gaps due to underinsurance and bridge wellness to primary care by developing access to primary care services that can be supported by employers
Mercy Hospital 144 State Street Portland, ME 04101	$197,052.00	$97,056 00	$0 00	PC	Our Medical Neighborhood Model is a partnership between Mercy Hospital (which includes three Hospital campuses, nine primary care centers, eighteen subspecialty practices and a VNA Home Health & Hospice) and three community partners In addition, we will leverage our "Preferred" relationship with two commercial insurers Aetna and Cigna Our goal is to build a low cost, high value integrated healthcare delivery system in the form of a Medical Neighborhood for the population of southern Maine. Mercy will implement a care and utilization management program for our hundred most costly charity care members We will implement management activities for this population that will be consistent with activities in our commercially insured Accountable Care populations.
USM/Edmund S Muskie School of Public Service, Cutler Institute for Health & Social Policy *P O Box 9300* *Portland, ME 04104-9300*	*$293,087.00*	*$83,329 00*	*$19,680.00*	*PC*	*Evaluation of MeHAF's Advancing Cost Containment and Payment Reform· Strategies in Support of the Affordable Care Act*

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Advancing Health System Reform - Policy/Data Research					
State of Maine, DHHS, Maine Center for Disease Control & Prevention 11 State House Station Augusta, ME 04333	$25,000 00	$25,000.00	$0 00	GOV	The Data, Research, and Vital Statistics Unit of Maine Center for Disease Control and Prevention, DHHS, State of Maine, will conduct an analysis of the BRFSS Health Access during 2014.
GfK Custom Research, LLC *120 Eagle Rock Avenue, Suite 200* *East Hanover, NJ 07936-3590*	*$29,800 00*	*$14,900.00*	*$0.00*	*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.*
GfK Custom Research, LLC *120 Eagle Rock Avenue, Suite 200* *East Hanover, NJ 07936-3590*	*$34,100 00*	*$16,600.00*	*$17,500.00*	*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*
Subtotal, Advancing Health System Reform Grant (17) & *Contract* (3) Payments = $1,245,704.20					
Promoting Patient-Centered Care - Integrated Care/Behavioral Health Homes					
Charlotte White Center 572 Bangor Road Dover-Foxcroft, ME 04426	$125,000.00	$75,000.00	$50,000 00	PC	The Charlotte White Center will begin delivering behavioral health home (BHH) services on April 1, 2014, with its clients who are adults with serious and persistent mental illness (SPMI) and children/adolescents with serious emotional disturbance (SED). Outreach to these individuals and/or their guardians and family members has begun Plans have been made with primary care providers serving most of these individuals to coordinate care through a single health and care plan. The CWC BHH team will conduct physical health screenings, coordinated referrals and follow-up, care coordination, wellness and self management activities

[illegible]	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
MaineGeneral Community Care/HealthReach Network 10 Water St Suite 302 Waterville, ME 04901	$125,000 00	$75,000 00	$50,000 00	PC	MaineGeneral Community Care, on behalf of Mid Maine Behavioral Health will coordinate the implementation of two models of behavioral health homes in the Kennebec/Somerset region Working with Kennebec Regional Health Alliance, Redington Fairview Healthcare, a network of primary care practices, and consumers, MMBH will focus on the coordination of care, consumer education, protocol development, system support and connection with other providers. This full coordination of care will maximize existing resources and enhance health outcomes.
State of Maine, Dept of Health and Human Services, Office of MaineCare Services 221 State Street Augusta, ME 04333-6846	$80,000.00	$80,000 00	$0 00	GOV	Maine DHHS will contract with Maine Quality Counts (QC) to provide technical assistance to practices participating in the multi-payer Maine Patient Centered Medical Home (PCMH) Pilot and MaineCare Health Homes (HH) initiative to support practice transformation efforts that include improvements in integration of physical and behavioral health care, and practice capacity to engage patients as partners Funding will allow QC to leverage their experience supporting practice improvement in the PCMH Pilot and spread best practices to advance the Triple Aim -- i e to improve patient experience and population health, and control healthcare costs
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04103	$124,658.00	$74,778 00	$49,880 00	PC	The Opportunity Alliance will implement system and practice re-design and infrastructure changes in its Behavioral Health Home (BHH) project Categories of services include· comprehensive care management, care coordination through individualized treatment plans, health promotion, transitional care, individual and family support, referral to community and social support services, nurse education, primary care, and a full continuum of behavioral health services (Access, Community Integration, Crisis, Peer and Family Navigation, Psychiatry)
Tri-County Mental Health Services PO Box 2008 Lewiston, ME 04241-2008	$125,000 00	$75,000 00	$50,000 00	PC	Tri-County Mental Health Services will provide higher quality, better coordinated, and more cost-effective care for people with Serious Mental Illness (SMI) through creation of a Behavioral Health Home (BHH) in Lewiston, Maine The BHH will use a team-based approach to coordinate care and community supports, to integrate behavioral health and primary care services, and to promote a whole-health and wellness approach to care while achieving the Triple Aim of improving the patient's experience of care, improving clinical outcomes, and reducing cost per unit of service.
John Snow, Inc. (JSI) *44 Farnsworth Street* *Boston, MA 02210-1211*	*$10,074.00*	*$10,074.00*	*$0.00*	*NC*	*JSI will create documents to assist MeHAF with summarizing the major learnings and activities of the Integrated Care Initiative and with disseminating this information.*

Promoting Patient-Centered Care - Thriving in Place

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Aroostook Area Agency on Aging, Inc 1 Edgemont Drive, Suite B PO Box 1288 Presque Isle, ME 04769	$252,250 00	$99,952.00	$152,298 00	PC	Thriving in Place-Aroostook targets adults with chronic health conditions, especially the elderly and frail, by working with at-risk individuals through enhanced screening and care plan development Referrals to county-wide coordinated community supports emphasize screening, self-management education and check-in services. All services and follow-up will be monitored through a centralized information system. Individual care coordination is aligned with policy-related education to impact severe transportation, home and respite/day care challenges Extensive volunteer network and resource development will also build these services. Decision-making will be shared among a stakeholder partnership, a consumer/family/caregiver steering committee and Aroostook's district public health council
Bucksport Bay Healthy Communities Coalition PO Drawer X Bucksport, ME 04915	$220,143.73	$93,713.89	$126,429.84	PC	The Bucksport Bay Thriving in Place (TiP) program will dramatically improve the health, safety and quality of life for Bucksport, Orland, Verona Island and Prospect residents living with chronic illness, aging or disability(ies) TiP will connect participants with a coordinated interdisciplinary team of 15 local and regional health and service organizations and a system of volunteers creating a localized continuum of care and a plan for lifelong, comprehensive health and wellness education
Charlotte White Center 572 Bangor Road Dover-Foxcroft, ME 04426	$300,000 00	$100,000.00	$200,000 00	PC	In Maine's second-oldest, most rural, and least healthy county, the Piscataquis Thriving in Place Collaborative (PTC) will create a sustainable and comprehensive resource/referral network that helps people with chronic health conditions avoid out-of-home care. With a diverse and robust volunteer and professional workforce, this network will be nimble enough to respond quickly to all referrals with a person-centered approach, assisting individuals and caregivers with assessment, planning, and referrals Through a collective impact process, the PTC will increase the integration and coordination of existing resources and build capacity in the following areas health-related transportation; volunteerism, home-based services, caregiver support, and community engagement
Washington Hancock Community Agency 7 VIP Drive Machias, ME 04654	$300,000.00	$100,000.00	$200,000 00	PC	WHCA will partner with Healthy Peninsula, an organization serving nine towns on the Blue Hill Peninsula "Gap analyses" done during a planning phase revealed a major gap between primary health care services and the community-based services that support patients in their homes. It was also found that community organizations were largely "siloed," and somewhat isolated from each other This three-year implementation project will address these gaps in order to create major systemic, sustainable improvements. Community Care Teams will work with Volunteer Health Advocates in four towns to provide care coordination and "warm hand-offs" to community and social services They will also embark on a marketing plan to increase awareness of community resources

Subtotal, Promoting Patient-Centered Care Grant (9) & Contract (1) Payments = $783,517.89

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Improving Access to Quality Care - Access to Quality Care for Uninsured Individuals					
Franklin Memorial Hospital 111 Franklin Health Commons Farmington, ME 04938	$48,566.00	$48,566.00	$0 00	PC	Franklin Memorial Hospital will develop a Collaborative Planning Team (CPT) comprised of key partners with a strong and successful history of working together The CPT will engage and bring "new" voices to the table, including non-traditional community groups, as well as uninsured consumers, all of whom will have an active role in the planning process. The CPT will develop lasting, supportive relationships among various community entities and individuals to build and sustain services that will ensure smooth and comprehensive care transitions and chronic disease management for the most vulnerable population. The goal is that all individuals, regardless of ability to pay for health insurance or services will be offered efficient, cost effective, high quality health care and services, smooth transitions between levels of care, and on-going support to maintain the greatest quality of life and wellness possible
Health Access Network, Inc (HAN) 175 W Broadway Lincoln, ME 04457	$50,000 00	$50,000 00	$0 00	PC	HAN will engage patients, health care, counseling and social service partners in rural northern Penobscot county to identify barriers to accessing rural health care and plan for the development and efficient coordination of health care services. The partners have committed to put forth a concerted and directed effort at developing a community-based plan to identify and address the most significant issues impacting patient access to primary care and behavioral services for poor and uninsured patients
HealthReach Community Health Centers 10 Water Street Suite 305 Waterville, ME 04901	$50,000 00	$50,000 00	$0 00	PC	HealthReach Community Health Centers' Access to Quality Care (A2QC)-Somerset project will improve both system coordination and capacity, as well as enhance consumer experience and overall wellness for low income and uninsured/underinsured consumers in the greater Bingham and Madison communities in Somerset County The A2QC-Somerset Planning group will use a shared goal of population health, aligned leadership, community engagement, collaborative use and analysis of data, and sustainability as the "blueprint" for its planning work In addition, the work of the planning group will build upon the principles espoused by the patient-centered medical home initiative, which recognizes primary care as the foundation for transformation of the health care delivery system with the understanding that patient-centered medical homes cannot change the system in isolation A2QC-Somerset will identify a project to continue to support the uninsured in its communities and develop a shared vision for how the partners can work most effectively together to address the needs of the uninsured in Somerset County

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
MaineHealth 110 Free Street Portland, ME 04101	$297,854 00	$99,981.00	$99,048 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. The program will be locally administered 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	$300,000.00	$100,000 00	$200,000 00	PC	Mercy's Medical Neighborhood will provide access to quality health care for all uninsured patients in the Greater Portland community through the expansion of its flexible care delivery system and by providing the necessary consumer insight to actively guide the response of the health care delivery system This project, using the Patient Centered Medical home model, has integrated social interventions into its care models with behavioral health services, community care teams, and care management, and remains committed to continually improving the patient experience for uninsured populations Case management helps uninsured patients connect with community mental health services, resources, and providers who are willing to provide ongoing care for uninsured patients Marketplace enrollment services and advocacy for governmental resources such as Medicaid Disability and Social Security benefits, will also be provided
Washington Hancock Community Agency 7 VIP Drive Machias, ME 04654	$50,000.00	$50,000 00	$0 00	PC	WHCA's CareNet is a grass roots responsive community-owned organization created to decrease disparity issues in Washington County by creating an organizational safety net to ensure that community members become insured and gain access to a responsive system of care CareNet grows out of the existing Washington County Network for Health and Wellness. It brings together community members to ensure community voice and choice, social service agencies, University supports, medical providers and medical institutions, as well as poverty programs serving the county and the Passamaquoddy tribe. It utilizes community proven strategies, and a shared history of collaboratively and responsively addressing the complicated health needs of rural Washington County.
Stephanie Cotsirilos, LLC 21 Chestnut Street, #803 Portland, ME 04101	*$9,000 00*	*$4,500 00*	*$4,500.00*	*NC*	*Consulting support to facilitate and build the A2QC grantees' learning network, and to plan and structure the year-long trajectory of upcoming quarterly meetings to ensure a productive grant period.*
Improving Access to Quality Care - Oral Health					
Aroostook Dental Clinic 122 Academy St Suite A Presque Isle, ME 04769	$18,785 00	$18,785 00	$0 00	PC	Aroostook Dental Clinic will increase outreach to inform the public about the County's first pediatric dental practice Funds are also requested to support training for the clinical team to deliver services more efficiently and effectively to the pediatric population.

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Community Dental 366 US Route 1 Falmouth, ME 04105	$24,705 00	$24,705 00	$0 00	PC	Community Dental will purchase and install IT hardware upgrades (specifically, an additional server and hard drive to increase image storage) which are required for the implementation of digital radiography in the Lewiston Center.
Fish River Rural Health PO Box 309 Eagle Lake, ME 04739	$16,720 00	$16,720 00	$0 00	PC	Fish River Rural Health will contract with a Dental Program Consultant to focus on the implementation of a practice enhancement program, and to design marketing materials for the planned comprehensive dental program
HealthWays/Regional Medical Center at Lubec, Inc 43 South Lubec Road Lubec, ME 04652	$15,600 00	$15,600 00	$0 00	PC	Regional Medical Center at Lubec will hire a second dental assistant to increase the efficiencies, effectiveness and accessibility of their dental program Funding will cover the costs (excluding benefits) of a full-time temporary dental assistant for six months, giving RMCL time to evaluate whether the addition of a permanent position is sustainable.
Lincoln County Dental Inc 748 Main St Damariscotta, ME 04543	$13,130.00	$13,130 00	$0 00	PC	Lincoln County Dental will expand operations to provide services to individuals with MaineCare insurance and expand services to the pediatric population They will purchase "missing elements" for their portable dental unit to enable them to provide dental services to low-income families in schools, daycare settings, and/or physician practices In addition, Lincoln County Dental will develop a long term strategic plan to meet sustainability goals.
Maine Community Foundation, Inc 245 Main Street Ellsworth, ME 04605	$50,500 00	$50,500.00	$0 00	PC	The Maine Oral Health Funders (MOHF) will establish the Maine Oral Health Fund to receive and administer funds on behalf of the funding partners that include MeHAF, the Bingham Program, the Betterment Fund, and the Sam L. Cohen Foundation. The MOHF will initiate a series of grants starting in 2014 to support community-based prevention efforts that build on existing local assets and address gaps to promote good oral health in early childhood and beyond, particularly in communities serving rural and/or low-income populations.
York County Community Action Corporation 6 Spruce Street Sanford, ME 04073	$17,143 00	$17,143 00	$0 00	PC	York County Community Action Corp. (YCCAC) will make modifications/improvements to dental staff capacity, scheduling practices, and Quality Assurance/Quality Improvement (QA/QI) work YCCAC will hire an additional dental assistant on a trial basis, whose work will be central to increasing productivity, and formalizing a comprehensive patient orientation for new dental patients

Subtotal, Improving Access to Quality Care Grant (13) & Contract (1) Payments = $559,630.00

Achieving Better Health in Communities - Healthy Community Grants Program

[illegible]	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Aroostook Band of Micmacs 7 Northern Road Presque Isle, ME 04769	$30,000.00	$10,000 00	$0 00	GOV	The Aroostook Band of Micmacs will complete an inquiry and community engagement process that will serve as the basis for the future Netukulimk 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 PO Box 1116 771 Main Street Presque Isle, ME 04769	$30,000 00	$10,000 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 disproportionally 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 the geographic area for this project with all citizens having the opportunity to participate.
City of Bangor, Health & Community Services 103 Texas Avenue Bangor, ME 04401	$29,480 00	$10,000 00	$0 00	GOV	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 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	$30,000 00	$10,000 00	$0.00	PC	Community Concepts (CCI), Healthy Androscoggin (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	$30,000 00	$10,000 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 a Interactive Institute for Social Change Facilitative Leadership planning process

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Healthy Community Coalition of Greater Franklin County 105 Mt Blue Circle, Suite #1 Farmington, ME 04938	$30,000 00	$10,000 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	$30,000 00	$10,000.00	$0 00	GOV	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 engage diverse groups and individuals (vulnerable populations, the broader community, and other key stakeholders) to identify up to two major health issues and community-defined health outcomes.
Maine Access Immigrant Network (MAIN) 237 Oxford Street Suite 25-A Portland, ME 04101	$30,000.00	$10,000.00	$0 00	PC	MAIN 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
Maine Sea Coast Mission 127 West St Bar Harbor, ME 04609	$28,400 00	$10,000 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	$30,000.00	$10,000 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.

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Mount Desert Island Hospital 10 Wayman Lane Bar Harbor, ME 04609	$29,731 00	$10,000 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 PO Box 840 Rockport, ME 04856	$29,999 00	$10,000.00	$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. 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 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, ME 04426	$27,439 40	$10,000 00	$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
Public Health Research Institute 15 Clifford Street Portland, ME 04102	$29,999.10	$10,000 00	$0 00	PC	The Washington County Network for Health and Wellness (WCN) is a 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 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.

[illegible]	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Redington-Fairview General Hospital 46 Fairview Avenue PO Box 468 Skowhegan, ME 04976	$30,000 00	$10,000 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 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, select the priorities and plan next steps
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04103	$30,000.00	$10,000.00	$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 formulate questions and select participatory, action-oriented, culturally-appropriate strategies for gathering input from the larger community.
The Opportunity Alliance 50 Monument Square, 6th Floor Portland, ME 04103	$30,000 00	$10,000 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 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 St Norway, ME 04268	$30,000 00	$10,000 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.

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
York County Community Action Corporation 6 Spruce Street Sanford, ME 04073	$30,000 00	$10,000 00	$0.00	PC	In 2009, Sanford and eight contiguous communities were designated a Medically Underserved Population by the Health Resources & Services Administration (HRSA) 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 Location: 18 Williams Street Mail: 15 Hospital Drive York, ME 03909	$28,300 00	$10,000.00	$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.
Maine Rural Partners *4 York Village* *Orono, ME 04469*	*$6,000 00*	*$6,000 00*	*$-*	*PC*	*Maine Rural Partners will maintain, manage, and improve the Maine Rural Health Network collaborative platform for use by grantees in MeHAF's three community-based initiatives (Access to Quality Care, Thriving in Place, and Healthy Communities)*
S E Foster Associates *8 Longfellow Road* *Lexington, MA 02420*	*$73,543.92*	*$60,000.00*	*$13,543.92*	*NC*	*Development of a Learning and Evaluation Approach to MeHAF's Access to Quality Care, Thriving in Place, and Healthy Community Grants Programs*
Subtotal, Achieving Better Health in Communities Grant (20) & Contract (2) Payments = $266,000					
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, television, and online media do a better job covering critical health care issues 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 75 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

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Daniel Hanley Center for Health Leadership 217 Commercial Street Portland, ME 04101	$55,000 00	$20,000 00	$0 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
Subtotal, Leadership Development & Capacity Building Grant (2) Payments = $38,000					
Discretionary Grants & Meeting Support					
Beth C Wright Cancer Resource Center P O Box 322 Ellsworth, ME 04605	$1,000 00	$1,000 00	$0.00	PC	The Down East Living With Cancer Conference offers people in Hancock County and surrounding counties the opportunity to attend an informative forum geared to people affected by cancer in a convenient location The conference will be held at the Atlantic Oceanside Conference Center in Bar Harbor.
Cary Medical Center 163 Van Buren Road Caribou, ME 04736	$1,000 00	$1,000.00	$0 00	GOV	To improve and expand the state's capacity to treat eating disorders, Mainely Girls with Cary Medical Center is providing a Two-Day Training for health care providers in Maine's underserved areas including the northern half of the state The conference is at the Caribou Inn and Convention Center in Caribou, Maine.
Division of Public Health, HHS Dept , City of Portland 389 Congress Street Portland, ME 04101	$10,000 00	$10,000 00	$0 00	GOV	The purpose of this survey is to gather opinions about community health needs in Cumberland County (CC) Anticipated totals are 2,164 survey respondents (1624 CC/540 Parkside neighborhood) targeting 15 cultural/linguistic groups, including ASL We use the information to improve our services, communication with community members, and organizations addressing health needs
Down East AIDS Network 25A Pine St Ellsworth, ME 04605	$2,000 00	$2,000.00	$0 00	PC	The Winter Gathering is consumer-lead statewide gathering for persons living with HIV (PLWH). The gathering provides an opportunity for PLWH to participate in educational and skill-building workshops, and enjoy the support of their peers in a non-judgemental environment The gathering will run March 28-March 30 at the Bangor Ramada Inn
Family Planning Association of Maine P.O. Box 587 43 Gabriel Drive Augusta, ME 04332-0587	$500 00	$500.00	$0.00	PC	The Comprehensive Sexuality Education Conference provides educational resources for teachers, school nurses, prevention/care providers, administrators, health professionals, community health planners, physicians, counselors, persons from community-based organizations, members of faith communities, social workers, parents, and public health individuals It will be held at the Civic Center in Augusta

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Family Planning Association of Maine P O Box 587 43 Gabriel Drive Augusta, ME 04332-0587	$9,000 00	$9,000.00	$0 00	PC	The use of technology to increase access to care is an essential public health activity By using technology to provide medication abortion services at three rural locations, Maine Family Planning will provide an important service for women who experience geographic challenges and financial difficulties in accessing safe, professional abortion care
Frannie Peabody Center 30 Danforth St Suite 311 Portland, ME 04101	$4,000 00	$4,000 00	$0 00	PC	Frannie Peabody Center will undertake a strategic planning process, following the LaPiana model, to decide if and how to broaden it's mission beyond HIV, and to augment its case management ability and talent
Maine Development Foundation 295 Water Street Suite 5 Augusta, ME 04330	$6,105.00	$6,105 00	$0 00	PC	At the request of the Legislative Council, Maine Development Foundation will organize four breakfast forums that provide an opportunity for Legislators to hear from Maine leaders on relevant and timely issues. The forums are for a Legislator-only audience where they can discuss the critical issues facing Maine
Maine Development Foundation 295 Water Street Suite 5 Augusta, ME 04330	$2,000 00	$2,000 00	$0 00	PC	A statewide Health Impact Assessment training and certification will be held at the University of Southern Maine in Portland October 14-15, 2014 for approximately 20 Mainers from the fields of public health, municipalities (planners, town managers, parks and recreation, etc) and others with an interest in promoting public health
Maine Farmland Trust, Inc. 97 Main Street Belfast, ME 04915	$750 00	$750.00	$0 00	PC	The sixth annual Maine Farmers' Market Convention will be held January 26th, 2014 at the Maple Hill Inn and Conference Center in Hallowell The Convention offers farmers' markets, members and supporters an opportunity to network and learn about how to strengthen farmers' markets in Maine
Maine Migrant Health Program PO Box 405 Augusta, ME 04332	$1,000 00	$1,000 00	$0.00	PC	The 6-day training will cover the following skills and content areas. communication, interpersonal, service/care coordination, capacity-building, advocacy, teaching, informal counseling and coaching and cultural responsiveness. Attendees will include Community Health Workers (CHWs) from the pilot projects, prospective CHWs, and/or CHWs who have no access to formal training and supervisors of CHWs
Maine Quality Counts PO Box 16 Manchester, ME 04351	$10,000 00	$10,000.00	$0.00	PC	This project is an Annual Conference with a statewide audience consisting of providers, payers, consumer/patients, and other businesses that support the healthcare industry The conference features three keynote speakers and 27 unique breakout sessions with content experts, including regional and national speakers

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Mobius, Inc. 319 Main Street Damariscotta, ME 04543	$9,000 00	$9,000.00	$0 00	PC	The proposed project would develop an approach for integrating care coordination for adults with intellectual disabilities into community case management and long term support services Existing targeted case management services protocols would be enhanced to include standardized practices for coordinating healthcare and health promotion of recipients
Penobscot Community Health Center 103 Maine Avenue Bangor, ME 04402-2100	$8,000 00	$8,000.00	$0.00	PC	The Opioid Addiction Recovery Program at Seaport Community Health Center is a peer-supported recovery/intervention that accelerates the medication-assisted tapering process, enhances long-term recovery rates, elevates global functioning, and reduces post-recovery costs Studies show peer counseling also results in lower relapse rates, as peer leaders are available between sessions for support and advice
Pine Tree Society for Handicapped Children and Adults, Inc. 149 Front Street P.O. Box 518 Bath, ME 04530	$10,000 00	$10,000 00	$0 00	PC	In 2001, Pine Tree Society transformed the way sign language interpreting services were provided in Maine through Video Remote Interpreting Today, the organization is implementing an initiative to upgrade technology and evolve to a pay-per-minute on-demand system to impact Maine's medically underserved Deaf community and reduce costs to our partners.
Port Resources 280B Gannett Drive South Portland, ME 04106	$2,000.00	$2,000 00	$0 00	PC	Port Resources is seeking proof-of-concept funding for a remote/virtual support program. The program will provide young adults with developmental disabilities and behavioral health challenges an opportunity to improve their quality of independent living. Participants in this program currently live on their own in various communities in Cumberland and York counties.
United Cerebral Palsy Of Northeastern Maine, Washington County Children's Program PO Box 311 Machias, ME 04654	$3,708 00	$3,708 00	$0 00	PC	Washington County Children's Program (WCCP) seeks support for routine maintenance, to purchase and install crucial equipment, for WCCP's mobile dental truck, named the "Tooth Ferry" The truck is in fine working order but needs the generator replaced, a suction motor, and is experiencing electrical issues as it is without a power source
University of New England 11 Hills Beach Rd Biddeford, ME 04005	$1,000 00	$1,000.00	$0 00	PC	Maine Geriatrics Conference features expert speakers providing evidenced based/best practices in older adult and caregiver health and health policy. The audience includes health providers/practitioners, service providers, and others. This 2 day conference is the longest running geriatrics conference in Maine and attracts participants from Maine, New England, and beyond

Organization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
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	Patient Safety Academy is an all-day conference with nationally recognized speakers, 9 workshops led by local and regional practitioners, Best Practice displays, and the awarding of the Rising Tide award, recognizing persons/organizations who have made a difference in patient safety in Maine
Subtotal, Discretionary Grant (10) & Meeting Support (9) Payments = $83,063					
Charitable Gifts					
Community Dental 366 US Route 1 Falmouth, ME 04105	$2,000 00	$2,000 00	$0 00	PC	Charitable gift to the safety net dental clinic for hosting a site visit from the national Funders Oral Health Policy Group on June 25 and 26 in Portland
Lincoln County Dental Inc 748 Main St Damariscotta, ME 04543	$500.00	$500.00	$0 00	PC	Charitable gift to the safety net dental clinic for hosting a site visit from the national Funders Oral Health Policy Group on June 25 and 26 in Lincoln County.
Maine Association of Nonprofits 565 Congress Street, Suite 301 Portland, ME 04101	$2,000 00	$2,000 00	$0 00	PC	MANP's Partners in Prosperity report illustrates how nonprofits provide an excellent return on society's investment In addition to quantitative data, the report also features stories of both social and economic impact from eight diverse Maine nonprofits MANP conducts regular research on Maine's Nonprofit Sector to help organizations, individuals and policy makers better understand the vital role of nonprofits in creating, sustaining and improving Maine's quality of life
Maine Behavioral Healthcare 123 Andover Road Westbrook, ME 04092	$600 00	$600.00	$0 00	PC	Charitable Gift in Recognition of Board Service
Maine Center for Economic Policy 66 Winthrop Street PO Box 437 Augusta, ME 04330	$1,800 00	$1,800.00	$0 00	PC	Charitable Gift in Recognition of Board Service
Maine Philanthropy Center P O Box 9301 Portland, ME 04104-9301	$5,000 00	$5,000.00	$0.00	PC	Support for 2014 Philanthropy Partners Conference

nization	Total Amount	Amount paid in 2014	Balance	Organization Tax Status	Project Description
Mid Coast Senior Health Ctr c/o Mid Coast Health Serv. Development Office P O Box 279 Brunswick, ME 04011	$600 00	$600 00	$0 00	PC	Charitable Gift in Recognition of Board Service
Subtotal, Charitable Gift (9) Payments = $12,500					
Program contracts are italicized and highlighted yellow					
		Total Grants Paid in 2014			**$2,780,512.09**
		Total Contracts Paid in 2014			**$195,403.00**
		Total Charitable Gifts Paid in 2014			**$12,500.00**
		Total Payments in 2014			**$2,988,415.09**
		Total New Grant Awards (Newly allocated in 2014) = 52 grants = $2,744,363.73			
		Grants Payable at Year End			**$1,893,065.84**

Maine Health Access Foundation

Grants Payable Report as of December 31, 2014

Organization Name	Address	Grants Payable Amount	Organization Tax Status
Aroostook Area Agency On Aging, Inc.	1 Edgemont Drive, Suite B Presque Isle, ME 04769-1288	$ 152,298 00	PC
Bucksport Bay Healthy Communities Coalition	PO Drawer X Bucksport, ME 04915	$ 126,429 84	PC
Charlotte White Center	38 Penn Plaza Bangor, ME 04401	$ 250,000 00	PC
Community Concepts, Inc	240 Bates Street Lewiston, ME 04220	$ 60,000 00	PC
Consumers For Affordable Health Care Fnd	12 Church Street PO Box 2490 Augusta, ME 04338-2490	$ 87,500 00	PC
Division Of Public Health, HHS Dept., City of Portland	389 Congress Street Portland, ME 04101	$ 59,999 00	GOV
Hand In Hand / Mano En Mano, Inc.	PO Box 573 Milbridge, ME 04658	$ 14,000 00	PC
Healthy Community Coalition of Greater Franklin County	105 Mt. Blue Circle, Suite #1 Farmington, ME 04938	$ 60,000 00	PC
Maine Access Immigrant Network	237 Oxford Street - Suite 25A Portland, ME 04101	$ 60,000 00	PC
Maine Assn Of Area Agencies On Aging	PO Box 5415 Augusta, ME 04332	$ 60,000 00	PC
Maine Equal Justice Partners	126 Sewall Street Augusta, ME 04330	$ 31,196 00	PC
Maine Medical Association	PO Box 190 Manchester, ME 04351	$ 42,895 00	PC
Maine People's Resource Center	565 Congress Street #200 Portland, ME 04101	$ 60,000 00	PC
MaineGeneral Community Care	10 Water Street, Suite 302 Waterville, ME 04901	$ 50,000 00	PC
MaineHealth	110 Free Street Portland, ME 04101	$ 158,868 00	SO III FI
Mercy Hospital	144 State Street Portland, ME 04101	$ 200,000 00	PC
Planned Parenthood Of Northern New England	128 Lakeside Avenue, Ste 301 Burlington, VT 05401	$ 60,000 00	PC
Preble Street Resource Center	38 Preble Street Portland, ME 04101	$ 60,000 00	PC
The Opportunity Alliance	50 Monument Square, 6th Floor Portland, ME 04101	$ 49,880.00	PC
Tri-County Mental Health Services	PO Box 2008 Lewiston, ME 04241-2008	$ 50,000 00	PC
Washington Hancock Community Agency	7 VIP Drive Machias, ME 04605	$ 200,000 00	PC
Total Grants Receivable		**$ 1,893,065.84**	

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 15
Year Ended December 31, 2014 01-0535144

Part XV, Line 2: Information Regarding Grant Programs

Line 2a: Grant applications should be addressed to:

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

Questions about specific funding opportunities 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 are available on the MeHAF website. All open competitive RFPs are publicized via MeHAF's e-mail newsletter, *AccessPoints*, and they are posted 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.

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

In 2014 one open competitive RFP and four invited RFPs were released. A total of 57 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, reporting, and on-line applications which have been recorded and are available to replay from the MeHAF website.

MAINE HEALTH ACCESS FOUNDATION
FORM 990-PF: SUPPLEMENTAL STATEMENT 15
Year Ended December 31, 2014 01-0535144

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, tribal organizations, or other public, non-profit entities. Private foundations, individuals, fiscal sponsorships and organizations with pending non-profit status are generally ineligible to receive funding through the competitive RFP process. MeHAF primarily funds Maine-based organizations; however, qualified organizations from outside the state may apply for funding if the project activities focus on Maine's health care system or Maine residents.

MAINE HEALTH ACCESS FOUNDATION

FORM 990-PF: SUPPLEMENTAL STATEMENT 16

Year Ended December 31, 2014 01-0535144

Part VII-A, 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: 3/29/2013
Grant Amount: $18,000
Grant Period: 4/26/2013 – 5/2/2014

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 the program includes a Maine journalist.

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

Based on the final report received May 27, 2014, 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 May 27, 2014. 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, 2014 01-0535144

Part VII-A, 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: 2/24/2014
Grant Amount: $18,000
Grant Period: 4/25/2014 – 5/31/2015

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):

Narrative and financial reports are due on 7/10/2015.

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 has not received reports from the grantee as narrative and financial reports are due on 7/10/15. 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 will review the reports from Blue Cross and Blue Shield of Massachusetts Foundation, to ensure the appropriate use of grant funds.