



SHARING STORIES

HELPS US

Listen, Learn & Improve





The mission of the Maine Health Access Foundation 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 uses its expertise in health and health care to support programs that move critical issues forward, cultivate connections between grantees and policy leaders, support key research, and strengthen and improve Maine's health care system so people in every region of our state have access to quality care and better health.

SHARING STORIES

HELPS US

Listen, Learn & Improve

Table of Contents

2014 ANNUAL REPORT

4-5	Spreading the word about the Health Insurance Marketplace
6	Putting the patient at the center of payment reform
7	Harnessing community members to help neighbors thrive in place
8	Advancing at the speed of trust to improve community health
9	Board of Trustees / Community Advisory Committee
10-13	Grants and Contracts
14	Statement of Financial Position

Message From the Board Chair & President



Sara Gagné-Holmes, Esq.
CHAIR, BOARD OF TRUSTEES



Wendy J. Wolf, MD, MPH
PRESIDENT & CEO

Listening and learning from the people we serve

The recent explosion of web-based TED talks underscores how evocative and motivating storytelling can be. The best TED talks typically start with a riveting personal story that provides the real world framework for the insights, knowledge and wisdom that the speaker feels compelled to share.

Most TED talks are delivered by highly educated, accomplished professionals. Yet, the most compelling speakers are often those who have overcome significant life adversity such as growing up in poverty, being subject to discrimination, experiencing societal violence or cultural dislocation. Their stories use the harsh realities of their circumstances to beat back stereotypes, challenge our assumptions about the way society tries to provide for those in need, and hopefully, conclude with a message that inspires hope.

“I don’t want to take anything from someone else who might need it more.”

Potential TiP consumer (Turn to page 7 to learn more.)

A central part of MeHAF’s mission is to improving the health and health care of Maine people who are uninsured and underserved. Over the years, we’ve learned the only way to succeed is to ensure that our efforts are guided and shaped by the experiences, shared stories and insights of the people we serve.

This commitment extends through our grant programs as well. We routinely require grantees to meaningfully engage and seek the advice and counsel of Maine people who are uninsured and underserved as part of their projects.

It sounds like a simple requirement to fulfill, but, time and again, we’ve learned how hard it is.

The vast majority of Mainers who are uninsured and underserved are people with low-incomes who typically don’t have resources to participate in patient advisory committees, public forums and volunteer boards. It’s tough finding extra money for gas or other transportation or finding child care to attend meetings or public forums. Plus, the stigma of living in poverty makes it challenging to feel that your voice will be welcome and valued. People are often hesitant to discuss their own needs out of pride or because they feel less vulnerable compared to others in their community.

It’s a testament to the grantees that they have embraced creative and innovative ways to engage people in our priority populations across the state. From community circles to bean suppers to online chats, they are trying to overcome these barriers and concerns.

At MeHAF, we know these are the voices and stories we must listen to and learn from if we are to keep evolving toward a transformed health care system that values every voice.

Sara Gagné-Holmes Wendy J. Wolf



Spreading the word about the Health Insurance Marketplace

Everyone in Maine deserves access to a basic level of quality health care services. This simple statement is the driving force behind MeHAF's strategic priority to promote "Access for All" and our Affordable Care Act (ACA) Outreach, Education and Enrollment grant initiative.

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 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. (To hear and read all of the stories, go to enroll207.com's YouTube channel <https://www.youtube.com/user/enroll207>.)

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!



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.



MATTHEW'S STORY

Taking care of himself and his family

Lobstering in mid-coast Maine is strenuous and dangerous work, but like many Mainers, Matthew Pinkham is happy to be his own boss doing work he loves. Before the Health Insurance Marketplace, Matthew had gone for years without health insurance. He knew that an accident might end up costing him his livelihood- his boat- if he were to incur unexpected medical debt- and put his family at risk.

"I have two kids, River who is seven, and Sailor, who is five. Every day on the boat there's a chance something can go wrong. [Before the Marketplace], insurance was going to cost me more than my boat payment. It bothered me not having insurance, because there were times when I messed up my knee, it took me four years to get the bills taken care of. Without health insurance, there's no safety net at all, but having it just gave me peace of mind."

KAIA AND JOE'S STORY

Affordable health insurance plan provides a springboard to a new venture

Maine is a state with many small and micro businesses (under 10 employees). Kaia Kallweit and Joe Trafton's new firm is one of Maine's latest additions. At first, Joe said that "starting a new business wasn't really an option until I learned about [the Marketplace]." After learning about affordable insurance options, the aspiring entrepreneurs felt confident launching their new venture.

"I was originally very skeptical... but [found that] for a small business like us, it has been a fantastic thing."



View more testimonials on the enroll207 YouTube channel.



Putting the patient at the center of payment reform

It's impossible to transform our health care system to deliver patient-centered care for everyone, regardless of insurance status, without changing how we pay for care. As part of our strategy to promote "Better Care," MeHAF launched a Payment Reform initiative in 2010.

Provisions of the Affordable Care Act and changes in payment advanced by private and public payers are trying to align payment with the provision of higher quality care with 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 the needs of uninsured and underserved people were included in the system improvements and payment reform activities happening across the state.

The grantee cohort included a diverse group of projects ranging from work 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 shared, 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.



"We have identified that not everything we believe is going to be the most appropriate intervention for the patient is really the right intervention, and [that] the majority of barriers to people getting care at the right place and right time were not patient barriers, but health care system related barriers."

Barbara Sorondo, Eastern Maine Health Systems

Eastern Maine Health Systems examined whether care management would reduce costs and utilization and increase patient satisfaction within Patient Centered Medical Homes, especially for uninsured and underserved patients.

"We're spending all of this time thinking about how we optimize the work flows within the practice, [but the ultimate aim is how the work] is really informed by and translated to the patient."

Stephanie Peters, MaineHealth

MaineHealth developed a new, data-driven model of primary care practice redesign and reimbursement aligned with principles of PCMHs that could be replicated by providers within and outside of the MaineHealth network. Stephanie has presented findings at statewide and national meetings.

"A key insight was, understanding that a medical model is not necessarily going to solve the issues of the uninsured. You can provide them episodic care and give them antibiotics for their tooth pain [and so on]. But they're not any healthier than they were before."

Tracy Harty, Franklin CARES

Franklin Memorial Hospital learned more about their patients who receive free care from the hospital 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

Most of us are among the 90% of Mainers who want to stay in their communities and homes as we age or live with chronic health conditions. Yet too often, resources and supports are not adequately distributed or aligned to meet the needs of these groups. To promote “Better Care,” MeHAF is working to bring providers, social support organizations and community members together to plan how to ‘thrive in place.’

Maine is facing an increase in the proportion of residents with chronic health conditions. In response, MeHAF launched our 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

“Visiting with her at her home, I thought she needed support in several areas to maintain her health at home. But she said, ‘I don’t want to take anything from someone else who might need it more.’ We need to include this point of view in implementing solutions.”

Meg Callaway, Charlotte White Center, recounting a meeting with a woman about getting support to remain at home.



“Dolores and I have been married for 63 years. Before her illness, her level of care of me was tremendous. Now I’m the caregiver, and realize that I need help. But I also want to contribute something, a resource for other caregivers that will live after me.”

Charles Buzzell, 83, retired administrator, volunteer and participant in the Piscataquis County TiP caregiver work group, explaining why he is involved.



to build trust and develop community plans to coordinate needed health care and social services.

By listening closely to everyone at the table, “People began to drop their guards, roll up their sleeves, and get to work on creative solutions,” said Meg Callaway, project director for the Piscataquis County TiP project. 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 everyday needs, like minor home repairs and social interaction, that can be the tipping point between thriving in place and institutional care.

Four 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. James Bradney, project director for the Bucksport Bay group, explained, “We realized it’s just as important to provide access and help for those in need as it is to allow all older adults, including those with chronic conditions who may be receiving services through TiP, to contribute their unique skills and gifts back to the community at large. People have a strong desire to contribute what they can to their communities. They want to give back.”

The TiP work is also linked closely with the Maine Aging Initiative, a statewide effort engaging a broad array of stakeholders to create a more age-friendly Maine.

<http://mainecouncilonaging.org/maine-aging-initiative.php>



Advancing at the speed of trust to improve community health

MeHAF's Healthy Communities program is the first multi-year initiative within our strategic priority of "Improved Health." The 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 improve health.

"People are yearning for the conversations, positive connections, and the opportunity to contribute that the Healthy Communities process affords."

Jim Douglas, Healthy Oxford Hills

To tackle this issue, communities need time to cultivate and nurture trusting relationships with people from varied backgrounds and

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 continue reaching out so that even the 'quietest' voices in the community were included.

Grantees have used this extra time well. As grantee Jim Douglas from Healthy Oxford Hills 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 local efforts that can only move forward at the speed of trust.



MeHAF's statewide Board of Trustees brings a wealth of expertise and experiences from distinguished and recognized leaders to oversee the work of the foundation and serve as responsible public stewards for the foundation's resources. The Board represents the demographic, professional and philosophical diversity that characterizes Maine. In 2014, the Board welcomed John Benoit, President of Employee Benefits Solutions at the Holden Agency, and Catherine Ryder, Executive Director of Tri-County Mental Health Services, as its newest members.

Board of Trustees - 2014

Constance Adler, MD, FAAFP
WILTON

John Benoit
SCARBOROUGH

Deborah Deatrick, MPH
FREEPORT

Nancy Fritz
AUGUSTA

Sara Gagné-Holmes, Esq.
READFIELD

Roy Hitchings, Jr., FACHE
CAMDEN

Frank Johnson
AUGUSTA

Anthony Marple, MBA
WHITEFIELD

Bruce Nickerson, CPA
BANGOR

Catherine Ryder, LCPC ACS
WINDHAM

Constance Sandstrom, MPA
PRESQUE ISLE

Lisa Sockabasin, BSN
OLD ORCHARD BEACH

Ted Sussman, MD, FACP
HOULTON

Jeff Wahlstrom
BANGOR

Shirley Weaver, PhD
KENNEBUNK

The foundation's work is enriched by the valuable input from our diverse, statewide Community Advisory Committee (CAC). These thoughtful and highly knowledgeable individuals expand our capacity to understand the needs of our priority population—people who are uninsured and medically underserved. Members are drawn from many sectors and geographic areas across the state. In addition to advising the Board and staff on the focus and approach to our periodic needs assessments, members identify critical issues that align with and promote MeHAF's mission and strategic initiatives. In 2014, the CAC welcomed six new members*.

Community Advisory Committee - 2014

Lisa Belanger, APRN*
NORTH YARMOUTH

Cynthia Freeman Cyr
DOVER-FOXCROFT

Bob Davis*
HARPSWELL

**Ann Gahagan, RN, BSN,
MSN, CDE, BC-ADM, FNP-C***
CARIBOU

Holly Gartmayer-DeYoung*
EASTPORT

Meg Haskell*
STOCKTON SPRINGS

Philip Heywood
CAPE PORPOISE

Alan Monier
BRYANT POND

Tezita Negussie, MPH, MSW
PORTLAND

Peggy Pinkham, RN
EAST BOOTHBAY

Charles "Scott" Planting
BAR HARBOR

Randy Schwartz
MANCHESTER

Toho Soma, MPH
PORTLAND

Meryl Troop
PORTLAND

Marjorie Withers, LCPC*
MACHIAS

Richard "Skip" White
PORTLAND

C. Shawn Yardley, MS
BANGOR

Advancing Health System Reform

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
HEALTH REFORM OUTREACH, EDUCATION AND ENROLLMENT			
Consumers for Affordable Health Care Foundation	Enroll ME and Keep ME Covered	\$87,500	\$175,000
HEALTH REFORM OUTREACH, EDUCATION AND ENROLLMENT - CONTRACTS/CONSULTANTS			
Burgess Advertising & Marketing	Health Insurance Marketplace Enrollment Campaign	\$769,041	\$769,041
Dirigo Design & Development	Enroll207	\$32,632	\$32,632
Mitchell Stein, Consultant	Health Policy Newsletter	\$31,442	\$31,442
Pivot Point, Inc.	Advancing Health Reform Through Outreach, Education and Enrollment, and Through Advocacy	\$12,494	\$12,494
Rachel Lowe, Consultant	Health Insurance Marketplace Public Education Coordinator	\$14,137	\$14,137
Total Grants and Contracts: Health Reform Outreach, Education and Enrollment (6)		\$947,245	
HEALTH REFORM ADVOCACY			
Consumers for Affordable Health Care Foundation	Giving a Voice to the Voiceless in Administrative Advocacy in Maine	\$75,000	\$150,000
Maine Center for Economic Policy	Delivering on the ACA's Promise of Affordable Health Care for Low-income Mainers	\$70,000	\$135,000
Maine Equal Justice Partners	Advancing Health Reform Through Administrative Advocacy	\$74,714	\$149,042
Maine Medical Education Trust	Ensuring Priority Populations Have Access to Meaningful Health Coverage through Implementation of the ACA in Maine	\$66,988	\$133,975
Maine People's Resource Center	ACA Grassroots Leaders Project	\$50,000	\$100,000
Total Grants and Contracts: Health Reform Advocacy (5)		\$336,702	
PAYMENT REFORM			
The Aroostook Medical Center	Northern Maine Advanced Medical Home Collaborative	\$95,791	\$193,642
Eastern Maine Medical Center Clinical Research Center	Patient Centered Medical Home Approach to Patient Activation	\$97,084	\$187,641
Franklin Memorial Hospital	Franklin C.A.R.E.S.-An Initiative to Provide Care, Access, Resources, Education and Support to Financially Disadvantaged Individuals in Need of Health Care Services	\$98,909	\$197,818
Maine Health Management Coalition Foundation	Advancing Payment Reform in Maine	\$25,000	\$75,000
Maine Medical Education Trust	Engaging Physicians in Payment Reform	\$94,944	\$189,888
Maine Quality Counts	Maine PCMH Pilot - Community Care Teams	\$24,990	\$74,986
MaineGeneral Medical Center	Effective Patient Engagement in Primary Care Transformation 2013-2014	\$25,000	\$75,000
MaineHealth	Primary Care Payment Reform: A Provider-Led Multi-Stakeholder Effort to Align Payment Strategies with the Triple Aim	\$97,900	\$196,200
Medical Care Development - Public Health	Buying Micro-Wellness in Rural Maine: Aligning Financing for Coverage and Wellness Services for Very Small Businesses and Individuals	\$25,000	\$75,000
Mercy Hospital	Mercy Medical Neighborhood	\$97,056	\$197,052
PAYMENT REFORM - CONTRACTS/CONSULTANTS			
Grantwise Consulting	Payment Reform Learning and Synergy Consulting	\$19,129	\$19,129
USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy	Evaluation for Advancing Payment Reform in Maine	\$83,329	\$293,087
Total Grants and Contracts: Payment Reform (12)		\$784,132	
POLICY/DATA RESEARCH			
GfK Custom Research, LLC	Maine Supplement to the Health Reform Monitoring Survey - 2014	\$16,600	\$34,100
GfK Custom Research, LLC	Maine Supplement to the Health Reform Monitoring Survey - 2015	\$14,900	\$29,800
State of Maine, DHHS, Maine Center for Disease Control and Prevention	Policy Research - BRFSS Access to Care	\$25,000	\$25,000
Total Grants and Contracts: Policy/Data Research (3)		\$56,500	
TOTAL GRANTS AND CONTRACTS: ADVANCING HEALTH SYSTEM REFORM (26)		\$2,124,579	

Promoting Patient-Centered Care

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
INTEGRATED CARE/BEHAVIORAL HEALTH HOMES			
Charlotte White Center	Charlotte White Center Behavioral Health Home Program	\$75,000	\$125,000
MaineGeneral Community Care	Coordinating a Kennebec Regional Response - Behavioral Health Homes	\$75,000	\$125,000
State of Maine, DHHS, Office of MaineCare Services	Building for Excellence: Expanding the PCMH Model in Maine	\$80,000	\$80,000
The Opportunity Alliance	Behavioral Health Home	\$74,778	\$124,658
Tri-County Mental Health Services	Behavioral Health Home Implementation	\$75,000	\$125,000
INTEGRATED CARE/BEHAVIORAL HEALTH HOMES - CONTRACTS/CONSULTANTS			
Brenda Joly	Integrated Care Round III & Key Informant Interviews	\$6,500	\$13,000
John Snow, Inc.	Maine Integrated Care: What We Learned	\$10,074	\$10,074
Maine Behavioral Healthcare	Integrated Care Reimbursement and Sustainability Contract	\$16,250	\$16,250
Total Grants and Contracts: Integrated Care/Behavioral Health Homes (8)		\$412,602	
THRIVING IN PLACE			
Aroostook Area Agency on Aging, Inc.	Thriving in Place across the Continuum of Care- Aroostook Plan	\$99,952	\$252,250
Bucksport Bay Healthy Communities Coalition	Bucksport Bay Area Thriving in Place	\$93,714	\$220,144
Charlotte White Center	Piscataquis Thriving in Place Collaborative Project	\$100,000	\$300,000
Washington Hancock Community Agency Healthy Peninsula	Thriving in Place Downeast	\$100,000	\$300,000
Total Grants and Contracts: Thriving in Place (4)		\$393,666	
TOTAL GRANTS AND CONTRACTS: PROMOTING PATIENT-CENTERED CARE (12)		\$806,268	

Improve Access to Quality Care

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
ORAL HEALTH			
Aroostook Dental Clinic - St Apollonia Dental Clinic	Training the Team and Marketing for the County's First Pediatric Dental Practice	\$18,785	\$18,785
Community Dental	2014B Building the Capacity for Maine's Oral Health Safety Net: Support to Implement Practice Improvement Plans	\$24,705	\$24,705
Fish River Rural Health	FRRH Dental Enhancement Project	\$16,720	\$16,720
HealthWays/Regional Medical Center at Lubec, Inc. Dental Department at Lubec	Dental Services Improvement Project	\$15,600	\$15,600
Lincoln County Dental, Inc.	Building the Safety Net	\$13,130	\$13,130
Maine Community Foundation, Inc.	Maine Oral Health Fund	\$50,500	\$50,500
York County Community Action Corporation	Nasson Health Care - Support to Implement a Dental Practice Improvement Plan	\$17,143	\$17,143
ORAL HEALTH - CONTRACTS/CONSULTANTS			
Alison Jones Webb	Maine Oral Health Funders Consultant	\$21,042	\$21,042
Dala Consulting	Maine Oral Health Funders Consultant	\$15,710	\$15,710
Total Grants and Contracts: Oral Health (9)		\$193,335	
IMPROVING ACCESS TO QUALITY CARE FOR UNINSURED INDIVIDUALS			
Franklin Memorial Hospital	Franklin Community CARES in 3D-Depression, Disease Management and Dental Health	\$48,566	\$48,566
Health Access Network, Inc.	Advancing Health Care Access for the Uninsured in Rural Central Maine	\$50,000	\$50,000
HealthReach Community Health Centers	Access to Quality Care - Somerset	\$50,000	\$50,000
MaineHealth	Expanding Access to Care: Care Partners York County	\$99,981	\$297,854
Mercy Hospital	Mercy's Expanded Medical Neighborhood	\$100,000	\$300,000

(Continued on page 12.)

Improve Access to Quality Care

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
(Continued from page 11.)			
Washington Hancock Community Agency	CareNet for Washington County	\$50,000	\$50,000
IMPROVING ACCESS TO QUALITY CARE FOR UNINSURED INDIVIDUALS - CONTRACTS/CONSULTANTS			
Stephanie Cotsirilos, LLC	Access to Quality Care (A2QC) Consultation	\$4,500	\$9,000
Total Grants and Contracts: Improving Access to Quality Care for Uninsured Individuals (7)		\$403,047	
TOTAL GRANTS AND CONTRACTS: IMPROVING ACCESS TO QUALITY CARE (16)		\$596,382	

Achieving Better Health in Communities

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
HEALTHY COMMUNITIES			
Aroostook Band of Micmacs - Economic Development	Netukulimk Community Health Project	\$10,000	\$30,000
Aroostook County Action Program, Inc.	Community Connections United to Improving Health	\$10,000	\$30,000
City of Bangor - Health and Community Services	Greater Bangor Healthy Communities Initiative	\$10,000	\$29,480
Community Concepts, Inc. - Resource Development	Achieving Better Health in Lewiston/Auburn	\$10,000	\$30,000
Healthy Communities of the Capital Area	Healthy Communities: Time to Increase Meaningful Engagement (TIME)	\$10,000	\$30,000
Healthy Community Coalition of Greater Franklin County	Feeding The Hunger - Uniting Franklin Forces for Better Health	\$10,000	\$30,000
Lincoln County Lincoln County Regional Planning Commission	Lincoln County Health Connections	\$10,000	\$30,000
Maine Access Immigrant Network	Healthy Communities: Coalition Building From the Ground Up	\$10,000	\$30,000
Maine Sea Coast Mission - Island Health Services	Building Sustainable Community Health Programs for the Outer Islands of Lincoln, Knox, Waldo, and Hancock Counties	\$10,000	\$28,400
MaineGeneral Medical Center Healthy Northern Kennebec	Healthy Waterville	\$10,000	\$30,000
Mount Desert Island Hospital	Building Connections to Health - Downeast Maine Communities Strive for Better Health Outcomes	\$10,000	\$29,731
Penobscot Bay YMCA Knox County Community Health Coalition	As We See It...Voices of Knox County	\$10,000	\$29,999
Piscataquis Regional YMCA	Community Health Improvement Project (CHIP)	\$10,000	\$27,439
Public Health Research Institute	Utilizing a Community-Based Participatory Process to Improve Health and Wellness for Communities Across Washington County	\$10,000	\$29,999
Redington-Fairview General Hospital Somerset Public Health	Achieving Better Health in Jackman, Maine: The Aging Project	\$10,000	\$30,000
The Opportunity Alliance - Communities Promoting Health Coalition/Healthy Lakes HMP	Access to Health for the Lakes Region	\$10,000	\$30,000
The Opportunity Alliance - Parkside Neighborhood Center	Parkside Neighborhood: Community Engagement for Better Health	\$10,000	\$30,000
Western Maine Health Care Corporation Healthy Oxford Hills	Achieving Better Health in Oxford County	\$10,000	\$30,000
York County Community Action Corporation	YCCAC Community Health Working Group	\$10,000	\$30,000
York Hospital Choose To Be Healthy Partnership	Achieving Better Health For Those With Low Literacy	\$10,000	\$28,300
HEALTHY COMMUNITIES - CONTRACTS/CONSULTANTS			
Carole Martin	Healthy Community Grants Consultant Support	\$7,842	\$7,842
Maine Rural Partners	Maine Rural Health Network	\$6,000	\$6,000
S.E. Foster Associates	Development of a Learning and Evaluation Approach to MeHAF's Access to Quality Care, Thriving in Place, and Healthy Community Grants Programs	\$60,000	\$73,544
Total Grants and Contracts: Healthy Communities (23)		\$273,842	
TOTAL GRANTS AND CONTRACTS: ACHIEVING BETTER HEALTH IN COMMUNITIES (23)		\$273,842	

Other Funding

ORGANIZATION	PROJECT TITLE	2014 AMOUNT	TOTAL AWARD
LEADERSHIP DEVELOPMENT & CAPACITY BUILDING			
Blue Cross and Blue Shield of Massachusetts Foundation, Inc.	2014 Health Coverage Fellowship	\$18,000	\$18,000
Daniel Hanley Center for Health Leadership	Building Patient Centered Interdisciplinary Teams To Implement Health Reform and Address Health Disparities in Maine	\$20,000	\$55,000
Total Grants and Contracts: Leadership Development and Capacity Building (2)		\$38,000	
DISCRETIONARY GRANTS & MEETING SUPPORT			
Beth C. Wright Cancer Resource Center	Down East Living With Cancer Conference - "Being A Partner in Your Own Health Care"	\$1,000	\$1,000
Cary Medical Center	Eating Disorders Treatment - Two-Day Core Training	\$1,000	\$1,000
Division of Public Health, HHS Dept., City of Portland Minority Health Program	Minority Health Needs Assessment in Cumberland County	\$10,000	\$10,000
Down East AIDS Network	Winter Gathering for People Living with HIV	\$2,000	\$2,000
Family Planning Association of Maine	9th Annual Comprehensive Sexuality Education Conference: Empowering the Brilliant, Resilient Teenage Braine: Navigating the Pathways to Sexual Health	\$500	\$500
Family Planning Association of Maine	Making Medication Abortion Accessible to Women in Rural Maine	\$9,000	\$9,000
Frannie Peabody Center	Strategic Planning	\$4,000	\$4,000
Maine Development Foundation	Policy Leaders Academy	\$6,105	\$6,105
Maine Development Foundation - Maine Downtown Center	Health Impact Assessment Training and Certification	\$2,000	\$2,000
Maine Farmland Trust, Inc.	Maine Farmers' Market Convention	\$750	\$750
Maine Migrant Health Program	Community Health Worker - Core Competency Training	\$1,000	\$1,000
Maine Quality Counts	Innovation to Transformation: What Will It Take?	\$10,000	\$10,000
Mobius, Inc.	Enhancing Care Coordination for MaineCare Recipients with Intellectual Disabilities	\$9,000	\$9,000
Penobscot Community Health Center	Peer Leadership in Recovery Groups	\$8,000	\$8,000
Pine Tree Society for Handicapped Children and Adults, Inc.	Video Remote Interpreting Initiative	\$10,000	\$10,000
Port Resources	Remote/Virtual Support Program	\$2,000	\$2,000
United Cerebral Palsy Of Northeastern Maine Washington County Children's Program	Restoring Light to the "Tooth Ferry"	\$3,708	\$3,708
University of New England - Dept. of Geriatric Medicine	24th Annual Maine Geriatrics Conference	\$1,000	\$1,000
USM/Edmund S. Muskie School of Public Service, Cutler Institute for Health & Social Policy	Patient Safety Academy	\$2,000	\$2,000
Total Grants and Contracts: Discretionary Grants and Meeting Support (19)		\$83,063	
CHARITABLE GIFTS			
Community Dental	National Funders Oral Health Policy Group Site Visit	\$2,000	\$2,000
Lincoln County Dental, Inc.	National Funders Oral Health Policy Group Site Visit	\$500	\$500
Maine Association of Nonprofits	Partners in Prosperity Report	\$2,000	\$2,000
Maine Behavioral Healthcare	Charitable Gift for Board Service (Cheryl Rust)	\$600	\$600
Maine Center for Economic Policy	Charitable Gift for Board Service (Lee Webb)	\$1,800	\$1,800
Maine Health Access Foundation	Charitable Gift for Board Service (Cheryl Rust)	\$600	\$600
Maine Health Access Foundation	Charitable Gift from BerryDunn	\$3,000	\$3,000
Maine Philanthropy Center	2014 Maine Philanthropy Partners Conference	\$5,000	\$5,000
Mid Coast Senior Health Center	Charitable Gift for Board Service (Cheryl Rust)	\$600	\$600
Total Grants and Contracts: Charitable Gifts (9)		\$16,100	
TOTAL GRANTS AND CONTRACTS: OTHER FUNDING (30)		\$137,163	
TOTAL GRANTS, CONTRACTS AND GIFTS		\$3,938,233	

Statement of Financial Position - 2014

	2014 Unaudited	2013
ASSETS		
General fund cash and cash equivalents	19,004	44,353
General fund investments, fair value	122,705,773	123,697,001
Program-related investments	750,000	750,000
Prepaid income taxes	— — —	— — —
Prepaid expenses and deposits	37,587	42,476
Property and equipment - net	42,331	47,469
Total Assets	123,554,695	124,581,299
LIABILITIES AND NET ASSETS		
Liabilities		
Grants payable	1,893,066	1,945,314
Deferred tax liability	592,000	575,000
Income tax payable	— — —	17,000
Accounts payable and accrued liabilities	110,004	39,118
Total Liabilities	2,595,070	2,576,432
Net Assets		
Unreserved Fund Balance	120,959,625	122,004,867
Total Net Assets	120,959,625	122,004,867
Total Liabilities & Net Assets	123,554,695	124,581,299

Statement of Activities and Changes in Net Assets

SUPPORT AND REVENUES		
Investment returns (losses), net of fees	4,741,248	17,096,051
Contributions	24,000	6,000
Other income: miscellaneous	3,308	3,225
Total Support & Revenue	4,768,556	17,105,276
EXPENSES		
Grants and program expenses, net of refunds of unspent amounts	2,725,773	4,286,444
Administrative expenses	2,858,103	2,140,957
Depreciation	16,922	17,404
Excise tax expense	213,000	396,012
Total Expenses	5,813,798	6,840,817
Change in net assets	(1,045,242)	10,264,459
MeHAF Net Assets, January 1	122,004,867	111,740,408
MeHAF Net Assets, December 31	120,959,625	122,004,867

Consultants

ACCOUNTANT

Margo Beland
Maine Development Foundation

AUDITORS

Jeff Skaggs, CPA, Principal
Julie Paquette, CPA, Audit Senior Manager
Baker Newman Noyes

TAX ACCOUNTANT

Drew Cheney, CPA
Baker Newman Noyes

GENERAL COUNSEL

Elizabeth M. Sellers, Esq.
Bernstein Shur

INVESTMENT ADVISORS

Gregory C. Johnson, CFA, Managing Principal
Michael D. Soares, CFA
Ian D. MacPherson, CFA

Note: The Board of Trustees engages the firm of Baker Newman Noyes of Portland, Maine to perform the annual audit. To obtain a copy of the 2014 audit report, contact the MeHAF office.

MeHAF Staff

Len Bartel
Becky Hayes Boober, PhD
Alyson Cummings, JD
Charles Dwyer
Morgan Hynd
Dani Kallian
Barbara Leonard, MPH
Catherine Luce, MBA
Holly Merrithew
Wendy J. Wolf, MD, MPH

MEHAF

MAINE HEALTH ACCESS FOUNDATION

PROMOTING ACCESS. IMPROVING HEALTH.