

2014 ANNUAL REPORT

WE ARE YOUR Foundation

Supporting Physicians, Patients, and Communities



Massachusetts Medical Society and
Alliance Charitable Foundation

Contents

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HISTORY

In May 2000, the Massachusetts Medical Society (MMS) House of Delegates established the MMS and Alliance Charitable Foundation as a supporting organization of the MMS. The Foundation, a not-for-profit 501(c)(3) organization, is a mechanism for consolidating the MMS's charitable giving to the community into one entity, building on the activities of the former MMS Committee on Community Action and the MMS Alliance Charitable and Educational Fund.

MISSION

The mission of the Foundation is to support the charitable and educational activities of the MMS and the MMS Alliance, including, but not limited to, developing and nurturing cooperation between individuals, professions, institutions, and the community to creatively address issues that affect the health, benefit, and welfare of the community.



Massachusetts Medical Society and Alliance Charitable Foundation

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www.mmsfoundation.org

Cover Photos:

Top-left and right: Students participating in Girls Inc. of Worcester's Fit Girls Program
Bottom-left: Medical Students providing nutrition counseling at the Sharewood Clinic

Message from the Chair

Dear Colleague:

The Massachusetts Medical Society and Alliance Charitable Foundation works on behalf of physicians and their families to improve the health and well-being of people across Massachusetts. *We are your Foundation.*

Since its inception, the Foundation has proudly supported physician-led volunteer initiatives that provide free care to uninsured patients and increased access to care for the medically underserved. The community health initiatives we fund target crucial public health issues such as infectious disease, homelessness, and relationship violence.

We remain committed to advancing the availability of accessible, quality health care and furthering the health and wellness of our communities, but we cannot do it alone! It is a challenging time for the Foundation. Requests for Foundation funding continue to grow; however, funding for education, prevention and screening programs, and other vital services in the community are in constant jeopardy. We continue to see increased need; yet, there are fewer dollars available to organizations and programs that serve our most vulnerable citizens.

As the charitable voice of physicians, we have the unique ability to address these problems with a medical perspective and a commitment to a healthy community. Please join the Foundation in its mission to improve the health and well-being of our communities. Your tax-deductible contribution will allow us to continue work on your behalf. Our dedicated board works diligently to ensure all funds are used wisely; and as always, 100 percent of your donation goes to the organizations we fund. Your donation will never be used to fund overhead or administrative expenses.

Thank you for your generosity and support. Together, I know we will continue to better the health and lives of people throughout the Commonwealth.



— Corey E. Collins, DO



As physicians working at the community level, you are keenly aware of the needs that exist where you live and practice. You are encouraged to direct agencies to contact us or visit our website at www.mmsfoundation.org for information on our funding priorities and criteria.

Partnership

At its Annual Meeting in May 2000, the MMS House of Delegates adopted policy that established an educational and service partnership between the MMS and the Albert Schweitzer Fellowship (ASF). Since 2002 the Foundation has been responsible for managing a \$25,000 directed donation for the partnership. Each June, the ASF submits a grant application to the Foundation, and the directors conduct an independent review and evaluation of the proposal.

The Albert Schweitzer Fellowship received \$25,000 in July 2013 from the Massachusetts Medical Society and Alliance Charitable Foundation to help support medical student fellows in the 2013–2014 Boston Schweitzer Fellows Program. Fellows create and implement 200-hour health-related community service projects to address unmet health needs in local, underserved communities. In addition to their service projects with local community-based agencies, fellows participate in structured leadership development activities throughout the year.

The 2013–2014 Boston Schweitzer fellows submitted their final reports in May. Among the 14 fellows that completed the fellowship, four were medical student fellows supported by the Massachusetts Medical Society and Alliance Charitable Foundation. A summary of their outcomes and achievements follows.

“The Albert Schweitzer Fellowship excels in developing emerging leaders in health who will serve vulnerable populations not just in their Fellowship year, but throughout their career. Schweitzer Fellowships change lives, both of the individual Fellows as well as those of the many vulnerable community members they serve through their Fellowship projects. Our Fellows learn to lead and innovate as they tackle complex health needs — skills they will use again and again throughout their professional careers. Meanwhile, their project participants learn information, skills, and behaviors that will assist them in leading healthier lives. We could not do this work without the support from organizations like the Massachusetts Medical Society and Alliance Charitable Foundation. Together, we are changing lives.”
— Sylvania Stevens-Edouard, Executive Director of The Albert Schweitzer Fellowship

Shabatun Islam,
Boston University School of Medicine
Community Site: Boston Center for Refugee Health and Human Rights

As a second year medical student at Boston University and a Schweitzer fellow, Shabatun Islam worked with the Boston Center for Refugee Health and Human Rights at Boston Medical Center to develop and implement the Highway to Health, which are health literacy workshops aimed at providing clients at the center the tools necessary to lead healthier lives. Clients are asylum seekers and survivors of torture who often struggle with maintaining better health due to a variety of reasons. Overall, the clients learned a great deal about disease prevention and how to live healthier lives while adapting to the challenges of living in the United States.

Ankit Modi, Boston University
School of Medicine
Community Site: Ethos

As a second year at the Boston University School of Medicine, Ankit Modi, started the student organization Dance for Health (DFH), which teaches dance classes to older adults in the southwest neighborhoods of Boston. Through the help of his partner organization, Ethos, they helped keep older adults active and thus improved their physical, social, and mental well-being. The overall goal was to help older adults maintain their independence as they age. DFH improved older adult happiness and health while also allowing medical student instructors to feel better-prepared working with older adults in their future careers.

“As we get busier as practicing physicians, I hear that many lose perspective on patients’ thoughts and beliefs. The Schweitzer fellowship allowed me to view health from the perspective of patients. I believe that as I begin my clinical training, I will be more cognizant about my patients’ ideas and beliefs when I provide health care.”
— Shabatun Islam, 2013–2014 ASF Boston fellow



“My Schweitzer Fellowship project was clearly a life-changing experience for me in so many ways. For one, it gave me the confidence to know that though life will always be busy, there is always time to dedicate for the service of others. The satisfaction you get from this service truly uplifts you and allows you to be great in the other aspects of your life as well.”
— Ankit Modi, 2013–2014 ASF Boston fellow

Julia Randall, University of Massachusetts Medical School

Community Sites: Central Massachusetts Region, Department of Youth Services, and Secure Treatment Centers

Julia Randall, a second year medical student at UMass, spent her fellowship creating and implementing a sexuality and general health education program for youth in detention centers through the Department of Youth Services (DYS). The interactive curriculum is designed to help teenagers make healthier decisions about their bodies and relationships while incarcerated and upon release back into our communities. She and her project co-creator, Rahela Aziz-Bose, trained six other medical student teachers to teach workshops to over 100 students in nine facilities over the course of the year. One hundred percent of the incarcerated teenaged students reported on their post-workshop evaluation that they learned something during the workshops that they would use in the future.

Morgan Younkin, Tufts University School of Medicine

Community Site: Christ the King Dorchester Resource Center

While a student at Tufts University School of Medicine, Morgan Younkin worked with Christ the King Dorchester Resource Center to strengthen a community-based English for Speakers of Other Languages (ESOL) program in the Upham's Corner Neighborhood of Dorchester, Massachusetts. He met his primary objectives of recruiting additional volunteers, establishing student referral partnerships with other community organizations, increasing student enrollment, and creating stronger organizational structure. In addition, a formal student referral relationship and potentially a program integration relationship were developed with the Higher Education Resource Center of Lion of Judah church in the South End. Student enrollment increased, but student retention proved more difficult, with between two or three students per class each night. Morgan loved laughing about the finer points of mashed plantains with two Dominican ladies who were some of the most consistent students.

ASF conducts systematic evaluations in order to measure its impact and to continually improve its programs. The pre- and post-fellowship surveys of fellows, as well as the final written reports they submit, capture data on the impact of their experience and their projects, the clients served, the host agencies, and schools. The post-fellowship surveys completed by site mentors also help measure these impacts. The combination of data allows us to analyze more thoroughly the impact of our program on clients, agencies, schools, and fellows and thus build a stronger program.

Our most recent 2012–13 survey results show that our fellows' projects are making an impact:

- » 1,395 clients were served.
- » 81% of community site mentors reported that they would recommend participating in the Schweitzer Fellowship to another community-based agency.
- » 93% of fellows reported that participation in the fellowship increased their skills to set realistic goals for a project.
- » 93% of fellows reported that participation in the fellowship increased their skills to advocate for underserved populations.

Survey results for 2013–14 will be available fall 2014.

“I began my project several months before applying for the fellowship, but it is the skills I learned at the monthly workshops and through conversations with the fellows that drove our success. Learning about program evaluation and the importance of data, and creating a sustainability plan early in the process turned what could have been a flimsy personal project into something that involved nearly 40 medical and nursing students and over 100 incarcerated youths.”

— Julia Randall, 2013–2014 ASF Boston fellow



“Social justice is an embodied reality — that is, it is not an ideal as much as a name given to concrete action and relationships. . . . The Schweitzer Fellowship emphasizes personal service and truly working with rather than working for — an asset-based approach to community development.”

— Morgan Younkin, 2013–2014 ASF fellow

2013–2014 Grants

The Foundation currently administers the following grant programs:

Community Action, which funds programs that creatively address issues that affect the health and well-being of the community

Care for the Medically Uninsured, which supports physician-led volunteer initiatives to provide free care to uninsured patients and increase access to care for the medically underinsured

AIDS Project Worcester — \$25,000 to continue expanding rapid testing for HIV and HCV as well as for other STIs such as gonorrhea, syphilis, and chlamydia.

During the first six months of 2014, AIDS Project Worcester

- » Tested 261 individuals for HCV — more than all of 2013 — and found 42 to be HCV+, which is almost twice as much as those undiagnosed in 2013. This continues to demonstrate that Worcester is still in the midst of an alarming hepatitis C epidemic that is mostly impacting young adults under the age of 30.
- » Tested 574 individuals for HIV, and found 4 to be HIV+, which represents a 300% increase from 2013. All previously undiagnosed HIV+ results were found in men who have sex with men, the majority being young men of color under the age of 35.

Boston Area Rape Crisis Center — \$10,000 to support the delivery of Responding to Disclosure for Medical Professionals trainings to medical professionals at Boston Medical Center and Newton Wellesley Hospital.

The Family Van — \$25,000 to support the organization's Youth Initiative, specifically the training of volunteers to co-lead a summer program; to focus on youth-specific health priorities; and to develop youth-specific marketing initiatives.



The Family Van (left to right) Reinaldo Zayas, Franchesca Moreta, Gillian Chase, Marvin So, Alexis Smith, Lunecee Eligene, and Yulizza Beech Ayuso.

Girls Inc., of Worcester — \$10,000 to support Promoting Health Lifestyles for At-Risk Girls and its program components Fit Girls and Friendly PEERsuasian, which are aimed at improving the health of vulnerable low- and moderate-income girls in Worcester.

“Continued exposure to good nutrition and participation in consistent physical activity as children and adolescents can increase girls’ chance of lifelong physical fitness and overall good health.”

— Victoria Waterman, chief executive officer, Girls Inc., of Worcester

Katie Brown Educational Program — \$25,000 to support the development of a formal Relationship Violence Prevention Education program to be delivered on college campuses.

Dating Abuse Facts

- » 43% of college women who date have experienced abusive dating behaviors (Liz Claiborne Inc. [2011]. *Love is Not Abuse College Dating and Violence Poll*).
- » Being in an abusive relationship increases risk of injury, binge drinking, drug use, suicide attempts, and unwanted pregnancies (All About Children Pediatric Providers [2003]. *Dating Abuse Fact Sheet*).
- » 38% of college students reported they would not know how to get help on campus if they were in an abusive relationship (Liz Claiborne Inc. [2011]. *Love is Not Abuse College Dating and Violence Poll*).

Lynn Community Health Center — \$16,500 to support the Teen Health Clinic, which opened in October 2013, in order to increase access points for teens, including peer-to-peer education, workshops, events, and social media.

MetroWest Free Medical Program — \$15,000 to support Diabetes Care for the Uninsured, which will include identifying clients in need of diabetes care and provide medical management, education, and support to improve their ability for self-management while assisting them with accessing a primary care physician.



MetroWest Free Medical Program As part of the MetroWest Free Medical Program's diabetes program, volunteers assemble kits that are provided to patients with diabetes. The kits include glucometers, test strips, and other supplies to support home blood sugar monitoring, as well as health education materials to reinforce the messages that they hear from doctors, nurses, and dietitians at the clinic. Patients receive their glucometer and test strips from the educator and are trained to use it, and we know that they have the tools they need to check their blood sugar at home. These kits are an important part of assuring that patients have the supplies they need for effective diabetes self-management.

Peer Health Exchange — \$25,000 to support Peer Health Exchange Boston, specifically to train 450 college students to teach comprehensive health education to 4,100 high school students who would not otherwise receive this education.

The Sharewood Project — \$10,000 to support this entirely student-operated medical clinic, which relies exclusively on volunteers to provide free health services to Greater Boston's most vulnerable residents.

Sunday Special Needs Swim Program — \$5,000 to support the cost of the special needs swim teachers who run two back-to-back, 45-minute sessions on Sundays, with 25 special needs children in each session, along with 40 volunteers.

“When we first began Sunday Swim three years ago, we hoped it would help our eldest daughter, then 9, manage her severe [...] symptoms. To our delight, it was the first program to include her typically developing siblings. All three children joyfully share this experience together and enjoy so much more than the physical benefits of exercise.”

— Mother of Sunday Swim participant

Volunteers in Medicine Berkshires — \$20,000 to support year one of the shared medical appointment program focusing on chronic disease.



Volunteers in Medicine Berkshires Dr. Jeffrey Blake, volunteer physician since 2005 and former co-medical director.

Women's Lunch Place — \$10,000 to support the organization's mission of providing a safe, comfortable daytime shelter, serve nutritious food, and offer essential services to improve the health and well-being of women who are experiencing poverty or homelessness.

In fiscal year 2013 the Foundation awarded a grant in the amount of \$15,000 to UMass Memorial Medical Center to support a home-based asthma reduction program with children with asthma and their families living in Worcester's low-income Bell Hill



neighborhood. Targeted for this pilot were children who have had multiple asthma-related urgent/emergency visits or admissions; are not taking, filling, or refilling prescriptions, or are overusing rescue medicines; miss school days; or have functional limitations. Here you see Brianna Cabrera (center) and Altgracia Sena (left) receive basic education on asthma and home triggers; they also learn how to properly use asthma education from Community Health Worker Ana Rodriguez (right). During the first six months of the pilot, 30 households received multiple home visits to identify and address asthma triggers. The knowledge gained through this pilot led to the planning and submission of the Prevention and Wellness Trust Fund grant application, which resulted in securing funding to expand the program not only at UMass Memorial but also to the Worcester Public Schools, Head Start, Edward M. Kennedy Community Health Center, the Family Health Center, and the City of Worcester Division of Public Health.

2013–2014 Grants

In addition to Community Action and Care for the Medically Uninsured, the Foundation also administers grants for **International Health Studies**, which provides funding for medical students and resident physician members of the MMS to pursue international education that focuses on underserved populations.

Sophia Kostelanetz — Tufts University School of Medicine

From August 2013 to May 2014, Sophia worked in Saint Marc, Haiti, as the Monitoring, Evaluation, and Quality Improvement (MEQI) Intern for Zanmi Lasante (ZL)/Partners in Health (PIH).

“It is difficult to sufficiently describe the opportunity for professional learning and growth that this work allowed. First and foremost, I was incredibly fortunate to work with a team of mentors that supported me in the details of the work as well as in understanding the work holistically. This included a mentor for each of the three roles I played (PMTCT [Prevention of Mother-to-Child Transmission] Quality Improvement, HSN [Hospital Saint Nichols] Quality Improvement Support, and Operational Research), as well as an overarching in-country mentor to provide guidance and support. I would not have been successful without the wisdom and leadership of these incredible individuals.”

Rebecca Cook, MD — Internal Medicine/ Pediatrics Resident, MGH

From January 22, 2014, to February 18, 2014, Dr. Cook visited Mbarara University of Science and Technology, one of a few academic medical centers in the country of Uganda and the main public referral hospital in southwest Uganda. The intention of her rotation was to focus on medical education in a resource-limited setting with the aims of refining her clinical skills and effectiveness as an educator with the ultimate goal of serving after residency as a clinician educator in Africa.

“It’s helpful to have a long-term perspective, even if you are there short-term. Often when Western medical providers visit resource-limited settings, especially for brief periods, they waver between well-intentioned but often naive ambition to ‘fix’ things and utter disillusionment and futility. Both attitudes are often not helpful and may damage partnerships. Sitting in the quiet village of Bugoye one night with one of the Ugandan Internal Medicine faculty members, he reflected on his perspective: ‘We will still be here. . . We will fall and then we will get up again.’ This wisdom helps ground me when I walk away from the pediatric wards feeling dismayed about the level of care we are able to provide. It also helps me remember that the most important investment I make is in the people who are here — the students and residents I’ve worked with.”

Brian Guercio, MD — Emergency Medicine Resident, BMC

From October 12, 2013, to May 1, 2014, Dr. Guercio worked at the Mae Tao Clinic (MTC), a refugee health clinic on the Thai-Burma border, on a multi-year, resident-led project to develop a training program to expand, enhance, and formalize the use of point-of-care ultrasound (POCUS). POCUS has been shown to have great utility in low-resource settings. POCUS has the potential to greatly improve the diagnostic and therapeutic capabilities at MTC. Useful applications at MTC include E-FAST scan in trauma, ultrasound-guided regional anesthesia, evaluation of abdominal pain, and assessment of renal and cardiac function for a variety of chronic and endemic tropical diseases.

This project is unique because Emergency Medicine (EM) residents provide the training for MTC medics. Other notable features of the project include the longitudinal presence of EM residents at the clinic and a “train-the-trainers” approach. The training curriculum is based on the American College of Emergency Physicians (ACEP) guidelines for ultrasound training in Emergency Medicine residency, the *Partners-In-Health Manual of Ultrasound for Resource-Limited Settings*, and an informal needs-assessment conducted in 2010.

“The potential impact of establishing a training program for POCUS is significant, but not surprising. What I did not expect, though, was how a simple effort to improve one aspect of the training program — the reporting of ultrasound results — would influence patient care at a systems level.”



Mbarara University of Science and Technology students on the pediatric ward.

Catherine Mygatt, MD — Family Medicine Resident, Lawrence

From November 1, 2013, to November 22, 2013, Dr. Mygatt worked at the Baptist Medical Center in Nalerigu, Northern Ghana, a full-service 110-bed district hospital serving local people as well as populations from neighboring West African countries. The town of Nalerigu is comprised of an ethnically diverse group of subsistence farmers; between seven and eight different languages are regularly spoken at the hospital. The members of this community live in mud dwellings with grass roofs and use bikes as their primary mode of transportation. The region is resource poor, with limited access to medical care, and the people rely on the hospital for their primary and chronic disease care and management of acute medical, obstetrical, gynecological, and surgical conditions. Infectious diseases predominate. The area is in the African Meningitis Belt, and many cases of cerebral malaria are seen in the pediatric population. Other parasitic infections such as hookworm, onchocerciasis, and filariasis are also commonly seen. The hospital also provides tuberculosis care for the region.

Additionally, a range of farming-related injuries — from snakebites to necrotizing fasciitis — is commonly seen, and malnutrition is a common co-morbidity in many patients.

“While in Ghana, I was overwhelmed by the need. With barely time to eat or sleep, there was little time to gain perspective on the experience. Having returned, I’m often caught comparing my work here as a resident with my work there as a doctor. My life as a resident is so focused on counting hours and patients and procedures, and patient care is often dominated by the frustrations of faulty computer systems and insurance company demands. In this environment, my responsibility to the profession and to my patients can be obscured. Medicine, in its purest form, is providing care to relieve suffering. Three weeks in Ghana brought this responsibility back into focus. For when medical resources are minimal, and the frivolity of Western medical systems is stripped away, I find myself humbled by how little I know and how much hard work lies ahead, and yet determined to use and honor all I’ve learned as a healer thus far.”

Matthew Corey, MD — Internal Medicine Resident, BMC

During the month of May 2014, Dr. Corey volunteered with Partners in Health at a village clinic in Chiapas, Mexico. He spent his time precepting newly minted Mexican doctors and worked in two rural clinics of Chiapas, a mountainous state near the Guatemalan border.

“In Massachusetts, we doctors believe we are confronting weighty ethical dilemmas. We ignore, however, how much this burden is lightened by the resources at our command: gleaming machines, ambulances at the touch of a 9-1-1, and above all, money. The ethical questions our colleagues face in a place like rural Mexico are of a different order. Because resources are scarce, the health care system of the village, of Mexico, of our unequal planet offers these doctors a menu of only tragic choices.”



Dr. Corey alongside a villager at the outreach fair. Balloons with public health messages were developed. This one reads, “Let’s respect our elders!”



Patients wait on clinic day — Baptist Medical Center, Nalerigu, Northern Ghana

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The 1781 Society, named for the year the Massachusetts Medical Society was established, is a means for recognizing those donors who have made plans to leave a gift to the Foundation after their lifetime. Donors may provide for the future of the Foundation through outright bequests to the Foundation, or name the Foundation as the beneficiary of a life insurance policy or retirement plan.

We are deeply grateful to every member of the 1781 Society, including those who prefer to remain anonymous. Your legacy will ensure that the Foundation continues to improve the health and lives of people throughout the Commonwealth.

"For many physicians who have worked in their district and state medical society at various levels, this provides a very meaningful opportunity. Major life transitions, such as retirement or illness, often spur individuals to assess their legacy. For me, after my health and my family, philanthropy became an important priority — trying to make things better for people who have been less fortunate." — Francis (Rusty) Van Houten, MD, Foundation advisor and prior board member, and former MMS president

HOLYOKE SOCIETY

The Holyoke Society is comprised of individuals who enroll as Life Members of the Massachusetts Medical Society. These distinguished physicians automatically become honorific members of the Foundation's Holyoke Society and a portion of their dues is contributed to the Foundation's endowment.

2009

Richard S. Pieters, MD
Edith M. Jolin, MD, MPH
Alain A. Chaoui, MD

2010

Jesse M. Ehrenfeld, MD, MPH
Chike O. Nwankwo, MD
Ronald G. Bardawil, MD
Thomas A. LaMattina, MD

2011

Desiree A. Carlson, MD
David J. Zaleske, MD
Philip A. Wolf, MD
Alice A. Coombs, MD
Mark M. Sherman, MD

2012

George Abraham, MD
Elsa J. Aguilera, MD
Maryanne C. Bombaugh, MD
Harry M. Curtis, MD
Stanley Glasser, MD
Allan H. Goroll, MD
Geoffrey M. Graeber, MD
Bernhard Heersink, MD
Joseph M. Heyman, MD
Peter C. Kenney, MD
Ann Loudermilk, MD
TK Raman, MD
Grant V. Rodkey, MD

Arthur C. Waltman, MD
Lynda M. Young, MD

2013

Kenneth Avery Heisler, MD
Sten B. Lofgren, MD
Barry M. Manuel, MD
Joanna M. Sawicka, MD
Christopher R. Smith, MD

2014

Patricia Rose Falcao, MD, MPH
Peter B. Kang, MD
Nasir A. Khan, MD
M. Donna Younger, MD

More Information

Join the MMS as a Life Member to be enrolled in the Holyoke Society. To receive a Life dues estimate, contact the Member Information Center at info@massmed.org or (800) 322-2303, ext. 7311.



The fifth annual Holiday Boutique, hosted by the Massachusetts Medical Society Alliance to benefit the Massachusetts Medical Society and Alliance Charitable Foundation, was held on Friday, December 6, 2013. Coinciding with the Society's House of Delegates meeting, the boutique featured mostly handmade items from Alliance members, including jewelry, wreaths, tabletop decorations, scarves, mittens, blankets, breads, candy, gingerbread houses, vinaigrettes, and jellies.

Silent Auction

The Foundation's 10th annual silent auction was held on Thursday, May 15, 2014, at the Seaport Hotel and World Trade Center in Boston. The auction was held in conjunction with the Nancy N. Caron Annual Member Art Exhibit, sponsored by the MMS Arts, History, Humanism, and Culture Member Interest Network.

For a number of years, the exhibit has provided a unique opportunity for members and their families to share their artistic talents. Their self-expression explores varied mediums and has been influenced and shaped by a variety of fascinating experiences. Artists were invited to donate their works for a silent auction to benefit the Foundation. Twenty-seven (27) artists participated in the event while 19 pieces of art were available for auction. In addition, we received 20 other items to be part of the silent auction. The event was an enriching experience, and more than \$3,750 was raised to support the Foundation and its activities.

Thank you to the following individuals and organizations that donated items for the silent auction:

Edward Amaral, MD
Paul Berman, MD
Beatrice Igne Bianchi
Jonathan Igne Bianchi
Margaret Igne Bianchi
Pat Downs Berger, MD
Jack Evjy, MD
Richard Gross, MD
Charles Huizenga, MD
Joyce Motta, Esq.
Mario Motta, MD
Laura Newstein
Marie-Christine Reti
Susana Rey-Alvarez, MD
Peter Schneider, MD
Arthur Skarin, MD
Sevim Under
Stuart Weisberger, MD

American Repertory Theatre
Berkshire Theatre Group
Bose Corporation
Cape Cod Symphony Orchestra
deCordova Sculpture Park and Museum
The Elephant Walk Restaurant Group
Huntington Theatre Group
Institute of Contemporary Art/Boston
Isabella Stewart Gardner Museum
Mass Audubon Society
Massachusetts Medical Society
New England Aquarium
New England Journal of Medicine
Norman Rockwell Museum
Seaport Hotel
Sur La Table — Natick, MA
Worcester Art Museum

Thank you to the following winning bidders for their generous support of the work of the Foundation:

Elsa Aguilera, MD
Charlie Alagero
Susana Rey-Alvarez, MD
Corinne Broderick
Ted Calianos, MD

Hu Caplan, MD
Nahed Chaoui
Alan Drabkin, MD
Louis Fazen, MD
Nanch Ghareeb
Dennis Gordan, MD
Joseph Heyman, MD
Steve Kasparian, MD
Aidan Kenealy
Judd Kline, MD
Paula Madison
Ana Manatis, MD
Eugenia Marcus, MD
Laura McCann, MD
Denise Mills, MD
Lee Mondale
Thomas Murray, MD
Lisa Nagy, MD
Keith Nobil, MD
Steve Phelan
Walter Rok, MD
Candace Savage
Jennifer Thulin, MD
Ana Vasilescu, MD
Alan Woodward, MD
Lynda Young, MD



Financials

Massachusetts Medical Society and Alliance Charitable Foundation
Statement of revenues and expenses and changes in net assets for
Fiscal Year ended May 31, 2014

STATEMENT OF ACTIVITIES
June 1, 2013, to May 31, 2014

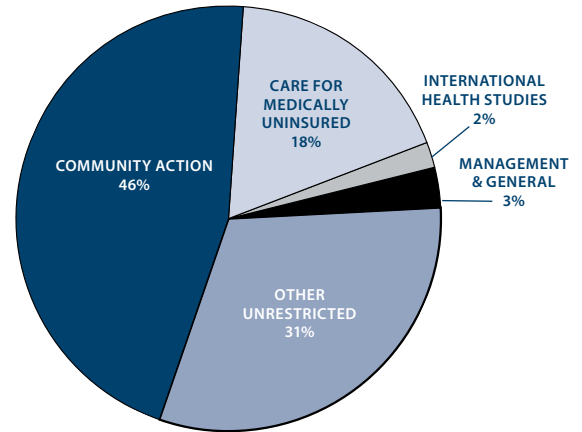
REVENUE*	AUDITED 2013	AUDITED 2014
Contributions		
Community Action	125	125
Care for Medically Uninsured	50	50
International Health Studies	5	5
Other Unrestricted	87	85
Endowment	9	1
Management and General	8	8
Total Contributions	284	274

OTHER REVENUE*	2013	2014
Unrestricted Investment Activity	3	5
Endowment Investment Activity	86	66
Total Revenues	373	345

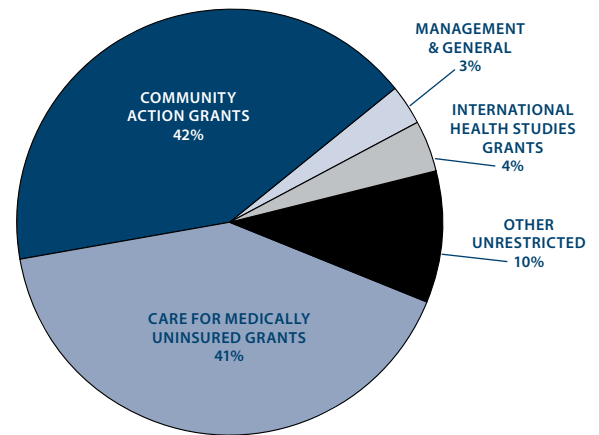
EXPENSES*	2013	2014
Community Action Grants	115	100
Care for Medically Uninsured Grants	55	97
International Health Studies Grants	9	10
Other Unrestricted	1	25
Management and General	6	6
Total Expenses	186	238
Excess of Revenues over Expenses	187	107
Net Assets, Beginning of Year	1,347	1,534
Net Assets, End of Year	1,534	1,641

*In thousands of dollars

CONTRIBUTION REVENUE — FISCAL YEAR 2014 Total \$274,000



EXPENSES — FISCAL YEAR 2014 Total \$238,000



Because of the extraordinary support the Foundation receives from the Massachusetts Medical Society, we are able to keep our overhead expenses extremely low. As a result, those who give to the Foundation can be assured that 100 percent of their contribution goes where it is needed most — to address issues that affect the health and well-being of the community.



WE ARE YOUR Foundation

Supporting Physicians, Patients, and Communities

Massachusetts Medical Society and Alliance Charitable Foundation

860 Winter Street, Waltham, MA 02451-1411

www.mmsfoundation.org

(800) 322-2303, ext. 7044/ (781) 893-4610/ (781) 434-7455 fax