THE BEST OF MEDICINE, SHARED

2025 | ANNUAL REPORT

MAVEN PROJECT

FROM OUR FOUNDER LAURIE GREEN, MD

This April, at an inspiring meeting attended by more than 50 MAVEN Project volunteers, our CEO, Jessica Lee, MD, gave voice to what every physician has felt: “No clinician should ever have to worry alone.”

Dr. Lee knows what that means. She has seen the moments when safety-net clinic patients arrive with conditions that require specialist expertise beyond the scope of primary care, and she has seen the safety-net at its most strained. She recognized the gap. At MAVEN Project, she found the solution.

The pages that follow show what your generosity has made possible, and the numbers speak for themselves. Behind every volunteer–primary care interaction is a patient who received better care and a clinician who didn’t have to solve a complex medical problem alone.

Policy changes this year have significantly increased the number of Americans at risk of losing Medicaid coverage — and safety-net clinics are already seeing the effects.

Their patients are arriving sicker, later, and with fewer resources. The frontline clinicians who care for them deserve the support you enable us to provide.

Some hope that artificial intelligence will enable primary care clinicians to manage increasingly complex patients independently, but information isn’t knowledge, and knowledge isn’t wisdom. Our volunteer specialists ensure that frontline clinicians—and their patients—benefit from the experience, judgment, and wisdom that come only from years at the bedside.

Every person who walks through the doors of a community health center deserves care informed by the best of medicine. With your partnership, that mission is within reach.

Continue your partnership — see how to give on page 19.
MAVENproject.org/donate

Sincerely,
Laurie Green, MD
Founder, President, and Board Chair

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FROM OUR CEO

As an ICU and pulmonary physician, I’ve spent my career in rooms where uncertainty is the norm and no one succeeds alone. Since joining MAVEN Project in November, I’ve seen that same spirit at work nationally.

Here’s what keeps me up at night: millions of patients depend on safety-net clinics, yet the clinicians serving them often face complex medical questions without a community of expertise to turn to. For patients, a referral can mean months of waiting, hours of travel, missed work, impossible costs, or care that simply doesn’t happen.

MAVEN Project is that community. We connect frontline care teams with experienced volunteer specialists for consultation, mentoring, and education, so patients receive high-quality care closer to home, from providers they already know and trust.

I think of it as a virtual clinic hallway. In well-resourced hospitals, a clinician can grab a specialist between patients to talk through a tough case. In a rural clinic or community health center, that colleague simply isn’t there, and the patient pays the price. MAVEN Project bridges that distance.

Every MAVEN Project interaction does two things at once. It addresses the patient in front of the clinician today, and it builds that clinician’s capacity for every patient going forward. When specialty referrals are still needed, they’re better informed and better coordinated. When care can stay local, patients avoid unnecessary delays and disruption.

This work has never been more urgent. Safety-net clinics are being asked to do more with less. New technologies, including AI, are transforming how clinicians access information. But information alone doesn’t improve care. Clinicians need judgment, experience, and trusted colleagues who can help them navigate complexity. MAVEN Project provides what technology cannot: human connection, clinical wisdom, and real-world experience shared through relationships.

I am continually inspired by our volunteer physicians, who give decades of hard-won expertise to communities they may never visit, and by the clinic partners, donors, and supporters who make this connection possible. Together, you are helping build a future where geography, income, or circumstance no longer dictates whether someone gets excellent care.

Thank you for being part of this.

With gratitude,
Jessica T. Lee, MD
Chief Executive Officer, MAVEN Project

CEO SNAPSHOT

Practicing pulmonologist in Philadelphia and board-certified in internal medicine, pulmonology, and critical care medicine

Adjunct faculty, University of Pennsylvania Perelman School of Medicine

Former Chief Medical Officer, Center for Medicaid & CHIP Services (CMS)

THE BEST OF MEDICINE, SHARED

MAVEN Project creates a virtual clinic hallway that connects safety-net providers with world-class specialists for e-Consults, mentoring, and education, removing barriers and delivering expert guidance directly into the communities that need it most.

11,957 E-CONSULTS IN 2025

Millions of patients in safety-net clinics never get access to a specialist. MAVEN Project changes that. We've built a virtual clinic hallway: a telehealth platform that connects safety-net providers with world-class specialists for e-Consults, mentoring, and education, right where care is already happening.

When clinic providers reached out for guidance, volunteers responded quickly—delivering timely specialist insight that helped primary care teams care for patients who might otherwise go without access to expert support.

CONSISTENT RESPONSE TIMES

On average, physician volunteers responded to consults in just 16.38 hours in 2025—helping clinics get specialist input when it mattered most.

94% of consults received a response within 48 hours, ensuring timely support for frontline providers and the patients they serve.

72% of consults were answered in less than 24 hours, demonstrating the responsiveness and commitment of MAVEN Project's dedicated physician volunteer network.

10 MOST REQUESTED SPECIALTIES

At a glance, the top 10 requested specialties where clinics needed support most—and where MAVEN Project volunteers stepped up in the biggest way:

1,666	Dermatology
1,412	Endocrinology
907	Hematology
729	Pediatric Dermatology
627	Cardiology
563	Neurology
502	Rheumatology
492	Gynecology
457	Infectious Disease
438	Gastroenterology

3 NEW SPECIALTIES

MAVEN Project expanded reach with three new specialties in 2025, helping clinics connect patients to even more targeted expertise:

+ Thoracic Surgery
+ Podiatry
+ Reproductive Medicine/Infertility

OUR EDUCATION PROGRAM

MAVEN Project's education programs sharpen clinical instincts — that confidence, built session by session across our network, is what turns uncertainty into action and action into lives changed. In 2025, MAVEN Project deepened its investment in the clinicians who serve communities with the fewest resources:

- Launched a new Learning Management System (LMS), giving providers faster access to track progress and retrieve CME certificates, so learning fits into the margins of an already-demanding day.
- Secured ACCME reaccreditation for an additional four years, a validation that MAVEN Project's programming meets the highest national standards for continuing medical education.

235 Education Sessions

3,894 Total Education Session Attendees

232 CME-Accredited Sessions

MENTORING

Every MAVEN Project mentoring engagement solves an immediate clinical problem, but the real impact multiplies far beyond that single patient. When a community health provider gains new diagnostic confidence from a specialist consultation, that knowledge stays with them for every patient who walks through the door afterward.

1,011 Mentorship Engagements

69 Mentors

176 Mentor Requests

84 Mentor Sessions Per Month

915 Hours of Mentoring

Dr. Loeb with mentee Dr. Turner.

EMPOWERING PROVIDERS, IMPROVING OUTCOMES

Using a secure platform, clinicians receive rapid guidance on complex cases, supporting faster diagnosis, treatment, and care coordination within the patient's medical home. Ongoing mentorship and education strengthen provider confidence, competence, and retention while helping patients receive timely, high-quality care closer to home.

4.9 — 4.9 out of 5-star satisfaction with the quality of consults—providing rapid, equitable access to world-class specialists.

81% — 81% of consults result in avoided external referral. Equipped primary care providers with skills, confidence, and knowledge to manage care.

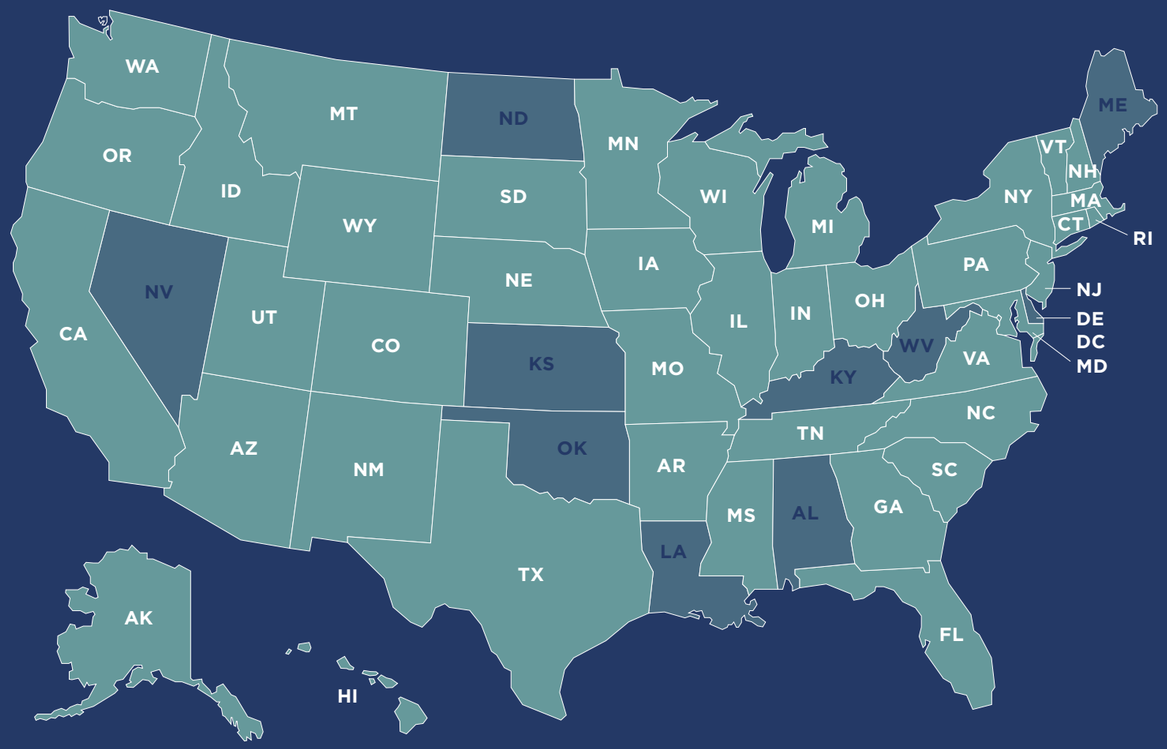
73% — 73% of consults improve primary care provider management of the disease process. Avoided unnecessary labs/tests, ER visits, and hospital admissions.

91% — 91% report "Access to MAVEN Project is improving patients' lives." Comprehensive care with trusted providers. Removed barriers to specialty care that patients may face.

64% — 64% report MAVEN Project "makes me more likely to stay at my health center." Reduced burnout.

86% — 86% of primary care providers report "MAVEN Project provides more confidence in fulfilling my role." Increased knowledge and confidence to manage complex conditions independently.

HOW MAVEN PROJECT DRIVES BETTER CARE



MAVEN Project is represented in 40 states + Washington, DC (41 jurisdictions). Also includes Palau, Federated States of Micronesia, Northern Mariana Islands.

MAVEN Project is not currently represented in these 10 states.

660+ MAVEN PROJECT PARTNER SITES

We work with America's Healthcare Safety-Net:
FQHCs, Free & Charitable Clinics, Rural Health Clinics, and Indian Health Service clinics.

Highlighted Partnerships:
PCAs: RI, AK, MT, PIPCA, and many more.

ACOs: Boston ACO & Community Care Cooperative (C3)

Health Plans: AlohaCare, Community Health Plan of Washington, CHNCT, and more

**Reflects data at time of publication.*

RURAL HEALTH

Montana Primary Care Association

ADVANCING CARE AT THE RURAL FRONTIER

Through MAVEN Project's telehealth platform, clinicians in rural communities connect with volunteer physicians from across the country, gaining access to the specialty expertise and peer support that are often hardest to find close to home. That connection helps local care teams make informed decisions faster, manage more complex conditions with greater confidence, and keep more care within the community. For patients, that can mean getting answers sooner, avoiding unnecessary travel, and receiving care closer to the people and places they know. For clinicians, it means feeling less isolated and more supported in the vital work they do every day. Over time, MAVEN Project strengthens rural healthcare from within—helping clinics expand what they can offer and helping communities build more reliable access to high-quality care.

BREAKING BARRIERS IN MONTANA

In 2025, the Montana Primary Care Association (MTPCA), serving Montana's Federally Qualified Health Centers (FQHCs) and Look-Alikes, engaged MAVEN Project for 44 clinic locations across the state—expanding access to trusted clinical support in rural and frontier communities where distance and limited resources can make care especially difficult to deliver.

> **Even for people who have the best insurance, if you live in a rural area, it's going to take hours to get to where the specialist is. The geographic distance alone creates enormous barriers."**
>
> **— Parinda Khatri, CEO of River Valley Health**

In its first partnership year (2025), 90 Montana safety-net providers accessed:

- 498 medical consults, with an average turnaround time of <17 hours
- Expert medical guidance in endocrinology, hematology, cardiology, neurology, and rheumatology
- 73 mentoring sessions with volunteer experts

This has led to:

- Supported care teams serving rural and frontier communities where specialty access is often limited
- Expanded access to care for people with complex medical and social needs who might otherwise face delays or long-distance travel.
- Specialty expertise brought directly into community health settings, allowing more concerns to be addressed earlier.
- Reduction in barriers that can shape outcomes, including transportation challenges, geographic distance, language barriers, long waits for appointments, and insurance-related obstacles.

PATIENTS IN RURAL AREAS FACE PERSISTENT BARRIERS:

- Limited provider capacity and long wait times for appointments
- Long travel distances
- Geographic isolation or structural access challenges
- Fragmented social supports
- Higher burdens of chronic disease

River Valley HEALTH

ACCESS ACROSS APPALACHIA WITH DR. PARINDA KHATRI, CEO OF RIVER VALLEY HEALTH AND MAVEN PROJECT BOARD MEMBER

Looking out her office window in Knoxville, Tennessee, Dr. Parinda Khatri can watch the morning fog drift across the Great Smoky Mountains. Much like the vast and varied landscape stretching beyond those peaks, the communities served by River Valley Health are remarkably diverse.

As Chief Executive Officer of River Valley Health, Dr. Khatri leads a community health network that reaches nearly 65,000 patients across 23 counties in Tennessee. In her time on MAVEN Project's Board of Directors, she has brought a unique perspective shaped by this incredibly diverse healthcare footprint.

River Valley Health's work extends across urban clinics, schools, public housing communities, homeless health centers, and migrant health programs. Yet the majority of its patients live throughout rural Appalachia, where geographic isolation, limited resources, and longstanding healthcare disparities create significant barriers to care.

"When I go to certain clinics, I don't have cell phone service," Dr. Khatri said. "If you look on a map, it doesn't appear far, but because you're traveling up and down mountain ranges, it can take four hours to get from one end of a county to the other. In many of our areas, if we were not there, there would be no access to care."

Those realities led River Valley Health to partner with MAVEN Project nearly five years ago. "When I heard about MAVEN Project, I knew we had to pursue it," she said. "There's tremendous moral injury for medical providers who want to do the best they can for their patients, but the specialty resources simply aren't there."

Tennessee did not expand Medicaid, and during the pandemic nearly 30 percent of River Valley Health's patients were uninsured; today, that figure remains about 27 percent. But for Dr. Khatri, access to specialty care is shaped by more than insurance—geography itself is often one of the greatest barriers.

What stands out most to Dr. Khatri about MAVEN Project is that its impact extends beyond answering clinical questions on individual patient cases. Through mentorship and continuing education, MAVEN Project helps strengthen the entire healthcare network.

"We're investing in a resilient workforce," she said. "If our primary care providers can learn from MAVEN Project specialists, it's not just about that one patient. You're increasing the capability of that provider and, by extension, the entire clinic."

That mix of volunteer expertise and growing demand shapes Dr. Khatri's view of what comes next. "The need is great," she said. "We're thinking future-forward. There is a vision for MAVEN Project to continue growing to meet that need."

For Appalachia's communities, that vision means greater access to specialty expertise, stronger local providers, and healthier futures.

> **"It can take four hours to get from one end of a county to the other... if we were not there, there would be no access to care."**
>
> **— Parinda Khatri, CEO of River Valley Health**

VOLUNTEER PHYSICIANS

Volunteer Physicians are the foundation of our work.

With skills and knowledge honed at many of the nation's leading medical institutions, they bring deep clinical expertise and an average of 30 years of experience in their specialty areas. Through mentorship and peer-to-peer consultation, they share practical insight, earned wisdom, and trusted guidance with frontline providers caring for patients in safety-net settings.

PROVIDER CHOICE AWARD WINNERS

- Dr. Scott Abramson, Neurology
- Dr. Debra Cohen, Pediatric Endocrinology
- Dr. Michael Day, Family Medicine
- Dr. Deborah Gold, Infectious Disease
- Dr. Peter Greenspan, Pediatrics
- Dr. Hunter Handsfield, Infectious Disease & STD/STI
- Dr. Edward Leon Guerrero, Family Medicine
- Dr. Fred Kleinsinger, Family Medicine
- Dr. Stephen Lieberman, Urology
- Dr. Joan Lister, Gynecology
- Dr. Barbara Loeb, Internal Medicine
- Dr. Charles Nieditz, Internal Medicine
- Dr. Charles Norris Jr., Psychiatry
- Dr. Tom Norris, Family Medicine
- Dr. Judian Smith, Psychiatry
- Dr. Lynn Sydor, Dermatology
- Dr. Katherine Upchurch, Rheumatology

AMERICAN MEDICAL ASSOCIATION FOUNDATION EXCELLENCE IN MEDICINE

Dr. Carrie Horwitch & Dr. Howard Pride

VOLUNTEER OF THE YEAR

Dr. Gerald Angoff

INNOVATOR AWARD

Dr. Susan Boiko

MENTOR AWARD

Dr. Betsy McCarthy

CHAMPION AWARD

Dr. Katherine Upchurch

EDUCATOR AWARD

Dr. Lucius Wright

About Dr. Doug Cappiello, Ophthalmology:

> Once again, a MAVEN Project consultant offered concise guidance that spared my uninsured patient anxiety and out-of-pocket testing costs. Thank you!"

About Dr. Jai Cho, Neurology:

> This was amazing! A speedy, thorough response, tailored to my patient which saved him time, money and likely avoided unnecessary workup with an MRI."

About Dr. Richard Nelson, Colorectal Surgery:

> Helped me avoid sending my uninsured patient for a consult. Answer was straightforward and gave me the information I needed. Thanks!"

About Dr. Marc Rosenshein, Hematology:

> Marc replied quickly with an informative answer that helped confirm my treatment plan and will help in my clinical decision making in the future. I appreciate it greatly!"

Drs. Lieberman and Sadur at a volunteer physicians lunch in February 2025.

A San Francisco lunch with Dr. Styne, Dr. Lusk, Dr. Bernhard, Dr. Goldfien, and Dr. Zemel.

Volunteer physicians from Massachusetts gather in Brookline for "Walk with a Doc" in November, 2025.

MOMENTS THAT MATTER

The Stories Behind the Mission

Dr. Reddy with representatives of the CHC of Franklin County.

SUPPORTING FRONTLINE DIABETES CARE

At the Community Health Center of Franklin County, a new initiative helps patients with uncontrolled type 2 diabetes achieve better outcomes through continuous glucose monitoring (CGM), education, and ongoing support.

This initiative, supported by MAVEN Project and funded by Dexcom, is led by volunteer endocrinologist Dr. Sushma Reddy, and provides Dexcom G7 CGMs to patients with A1C levels of 8% or higher, allowing them to see how daily choices affect blood sugar in real time. The impact has been significant: patients who entered the program with A1Cs as high as 14% have reduced them to the 7–8% range within weeks.

“We see these incredible lightbulb moments,” said Dr. Reddy. “Patients suddenly understand what’s happening in their bodies and feel empowered to make changes.”

To ensure access, clinics provide receivers for patients without smartphones and offer education in multiple languages. Combined with MAVEN Project’s specialist mentorship model, the program demonstrates how removing barriers and providing the right tools can dramatically improve diabetes care and outcomes.

> “I have avoided referrals to cardiology and nephrology through the amazing recommendations I received from the specialists via the consults.”
>
> — Clinic Provider

THE CALL THAT CHANGED EVERYTHING FOR A RURAL WYOMING PATIENT

For nearly a year, a patient in Laramie, Wyoming lived with a worsening movement disorder that eventually became constant, uncontrollable shaking, causing severe neck pain and making it nearly impossible to sleep or work. Without insurance and running out of hope after months of appointments that failed to provide answers, he was referred to Downtown Clinic, where Dr. Mike Comly, who has volunteered at Downtown Clinic for 24 years, strongly suspected a neurological cause but lacked the specialist resources to confirm it. With the local hospital missing key specialties and a neurology appointment potentially six months away, Dr. Comly turned to MAVEN Project and was connected with a volunteer neurologist specializing in movement disorders who reviewed the case, confirmed the diagnosis, and outlined a clear treatment plan, including targeted Botox injections. “Saving steps even when you have resources is important,” said Pete Gosar, Executive Director of Downtown Clinic. “But when you don’t have resources, it’s really, really important.” What could have meant months more of uncertainty and mounting costs instead became a direct path to relief, all because a MAVEN Project specialist donated her expertise to a patient she would never meet, giving both the patient and the clinic an extraordinary gift.

> This has been a game changer for me to be able to provide the care I want to for those who need it the most.”
>
> — Clinic Provider

A LIFETIME OF CARE: HOW TPMG PHYSICIANS EXTEND THEIR LEGACY THROUGH THE MAVEN PROJECT

For many physicians, retirement is not an ending—it’s a continuation of a lifelong commitment to care. That is especially true for retired physicians from The Permanente Medical Group (TPMG) who volunteer with MAVEN Project. What once was a patient panel becomes a nationwide network of clinicians in safety-net settings, and their clinical impact extends across communities facing the greatest barriers to care. Today, 20% of MAVEN Project’s volunteers come from Kaiser Permanente medical groups, reflecting a strong legacy of service.

For many TPMG retirees, the transition feels natural. After 20 years in dermatology, Dr. Sandhya Yadav found her way to MAVEN Project’s teledermatology program. “I’ve been blessed with the opportunities I’ve had in life. It was time to give back,” she said. Now she provides consults each week, collaborating with other specialists while staying deeply engaged in patient care.

Dr. Kevin Walsh, a retired internal medicine and addiction medicine physician, describes MAVEN Project as a way to stay connected to purpose. “At 60, you still feel like you have plenty of life left. You’re not done helping,” he said. Through MAVEN Project, he continues mentoring clinicians in underserved clinics. “What better thing could a doctor do than support the clinicians caring for those with the greatest needs?”

For pediatric endocrinologist Dr. Pratima Misra, MAVEN Project bridges a critical gap in specialty access. “There is a huge need for specialty care in rural and remote areas,” she said. “MAVEN Project helps fill that gap.”

Though their clinical roles have changed, their mission has not. Through MAVEN, Project these physicians continue to extend their legacy—strengthening frontline care and ensuring expertise reaches patients who need it most.

> MAVEN Project has allowed me to practice at the top of my scope of practice, by having specialists available to provide essential guidance on patient care where I would normally have to refer a patient out. Often a referral out to a specialist in my patient population means the patient will not follow up due to financial and/or transportation constraints.”
>
> — Clinic Provider

PARTNER SPOTLIGHTS

American Kidney Fund®
FIGHTING ON ALL FRONTS

In 2025, the American Kidney Fund (AKF) and MAVEN Project launched a strategic partnership to strengthen primary care capacity and advance the early identification and treatment of kidney disease.

The collaboration reflects a shared commitment to ensuring that frontline clinicians in community health centers and safety-net clinics have access to current, evidence-based resources to improve patient outcomes and reduce health disparities.

Kidney disease remains one of the nation's most significant and underrecognized public health challenges. Because early-stage kidney disease often has few or no symptoms, many patients are diagnosed only after significant kidney damage has occurred, when treatment options become more limited and costly.

The burden falls disproportionately on underserved communities, where chronic kidney disease is more prevalent among individuals with lower socioeconomic status and barriers to healthcare access can delay diagnosis and treatment.

Through this partnership, AKF develops educational content for community health centers and safety-net clinics and provides subject-matter expertise for certain learning activities. MAVEN Project offers continuing medical education (CME) accreditation for participating healthcare providers, helping ensure that clinicians can access high-quality training while earning professional credit.

AKF also contributes educational materials to MAVEN Project's network, evaluates opportunities to strengthen existing nephrology content, and has recruited four nephrologists to expand specialty referral capacity.

In turn, MAVEN Project shares data on common clinical questions and knowledge gaps, helping inform the development of future educational resources and programs.

WHY KIDNEY DISEASE MATTERS IN UNDERSERVED COMMUNITIES

- More than 37 million U.S. adults are living with chronic kidney disease.
- Nearly 9 in 10 adults with chronic kidney disease are unaware they have it.
- People with lower incomes and lower educational attainment are more likely to have chronic kidney disease, and barriers to healthcare access can delay diagnosis and treatment.
- Early detection can slow disease progression and help patients avoid kidney failure, dialysis, or transplantation.

MAVEN Project remains deeply grateful to all of its partners for their shared commitment to underserved communities. Some notable partnerships in 2025 include:

COVERYS

Coverys Community Healthcare Foundation

Coverys Community Healthcare Foundation Inc. supported MAVEN Project through its "Advancing Health Care Access: Building a Stronger Future for Rural Communities" initiative. This funding advanced MAVEN Project's efforts to expand its proven telehealth model, connecting frontline providers in rural and frontier communities with a national network of experienced medical specialists.

American Heart Association.

American Heart Association

In 2025, American Heart Association Social Impact Funds provided a grant to support MAVEN Project's work breaking down socio-economic barriers to healthcare and ongoing efforts to connect low-income and underserved patients with high-quality, comprehensive care.

COMMUNITY CARE COOPERATIVE

Community Care Cooperative (C3)

MAVEN Project continued its partnership with Community Care Cooperative (C3), an Accountable Care Organization (ACO) and Shared Services Company representing FQHCs. The partnership represents a shared commitment to access to specialty care for thousands of underserved patients across their FQHCs.

By connecting with MAVEN Project, health plans and PCAs can extend scarce specialty expertise directly to frontline providers, helping them manage more complex patient needs close to home MAVEN Project expanded its reach with several PCAs in 2025, notably:

ALOHACARE

AlohaCare is a community-led nonprofit health plan founded by Hawai'i's community health centers and Queen Emma Clinics. AlohaCare partnered with MAVEN Project in 2025 to pilot the model with Kalihi-Palama Health Center in Honolulu. The partnership creates a pathway to expand specialty access across AlohaCare's network, helping address Hawai'i's geographic isolation, limited specialty care, and inter-island travel barriers.

COMMUNITY HEALTH PLAN of Washington™
The power of community

Community Health Plan of Washington (CHPW) and MAVEN Project partner to support 84 clinic sites across Washington state.

APCA
ALASKA PRIMARY CARE ASSOCIATION

Alaska Primary Care Association
4 FQHCs operating 5 sites.

Pacific Islands Primary Care Association
PIPCA

Pacific Islands Primary Care Association
3 FQHCs operating 7 sites.

FOLEY
FOLEY & LARDNER LLP

MAVEN Project is grateful for the support of Foley & Lardner LLP in 2025.

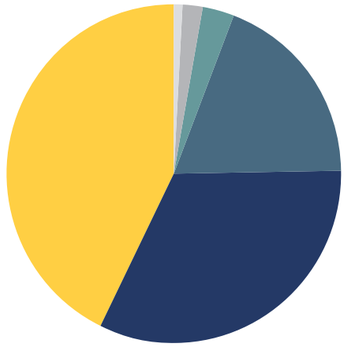
FINANCIALS, YEAR END 12/31/25

STATEMENT OF FINANCIAL POSITION

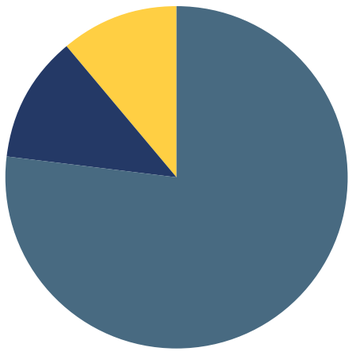
ASSETS	
Cash and cash equivalents	$5,101,916
Unconditional pledges	$596,500
Accounts receivable	$106,366
Prepaid expenses	$56,195
Equipment and website, net	$1,114,288
Land held for sale	$0
LIABILITIES	
Accounts payable	$118,479
Accrued payroll	$125,148
Deferred revenue	$881,102
Total Liabilities	**$1,124,729**
NET ASSETS	
Without donor restrictions	$4,886,932
With donor restrictions	$963,604
Total Net Assets	**$5,850,536**
TOTAL LIABILITIES & NET ASSETS	**$6,975,265**

CHANGE IN NET ASSETS:
Amounts in USD.

$62,042



Miscellaneous	$471
Education programs	$82,250
Investment return, net	$150,686
Donated services	$969,608
Non-clinical admin fees	$1,679,939
Contributions	$2,168,841
TOTAL REVENUE	**$5,051,795**



Program Services	$3,862,725
Management & General	$602,489
Fundraising	$524,539
TOTAL EXPENSES	**$4,989,753**

BOARD & LEADERSHIP

BOARD OF DIRECTORS

LAURIE GREEN, MD
Founder, President, and Board Chair

LAURA MELAHN
Founder, Meadow Valley Partners

NATHANIEL LACKTMAN
Partner, Foley & Lardner LLP; Chair, Telemedicine & Digital Health

CHASE BEHRINGER
Founder, Silicon Valley Social Value

PARINDA KHATRI
CEO, River Valley Health

MARIO MOLINA, MD
Former CEO, Molina Healthcare

GRANT CHAMBERLAIN
Ziegler Healthcare Investment Banking

VICKI ESCARRA
Board Member Emeritus

JAY GELLERT
Former CEO & President, Health Net, Inc.

HOWARD A. KAHN
Retired CEO, L.A. Care Health Plan & CA Wellness Foundation

DEVON FISCHER
Nonprofit Fundraising & Community Leader

BARTH A. GREEN MD, FACS, FAANS
Chairman Miami Project/University of Miami Miller School of Medicine

We would like to offer our sincere gratitude to Muriel Nouwezem, CEO of Saban Clinic, for her service on the MAVEN Project Board of Directors.

EXECUTIVE LEADERSHIP

JESSICA T. LEE, MD, Chief Executive Officer
JENNIFER E. GARVER, CPA, Chief Financial Officer
MEREDITH A. SCHANDA, DNP, MBA, FNP-BC, Chief Operating Officer
MARIA A. PERKINS, MBA, Chief Information Officer
CORRIN COLESAR, MPH, Director of Administration and Special Projects
BETH M. SHORT, MA, Director of Strategic Marketing and Advancement

SENIOR TEAM MEMBERS

CRYSTAL WEEKS COHENS, MHA, Senior Director of Business Development
HYELIM PARK (ESTHER), MSN, FNP-C, Senior Director of Clinic Partnerships
JILL EINSTEIN, MD, Senior Director of Physician Engagement
KAREN L. MYERS, PHD, GPC, Senior Director of Institutional Support

SPECIALTIES

ADULT SPECIALTIES

- Addiction Medicine
- Allergy & Immunology
- Anesthesiology
- Cardiology
- Colorectal Surgery
- COVID-19
- Dermatology
- Endocrinology
- Endocrinology, Transgender
- Gastroenterology
- General Surgery
- Gynecology
- Hand Surgery
- Hematology
- Hepatology
- HIV/AIDS
- Immigrant & Refugee Health
- Infectious Disease
- Reproductive Medicine/Infertility
- Lifestyle Medicine
- Lipidology
- Medical Ethics
- Medical Genetics
- Nephrology
- Neurology
- Neurosurgery
- Obesity Medicine
- Oncology
- Ophthalmology
- Orthopedics/Sports Medicine
- Otolaryngology
- Pain Management
- Palliative Care
- Peri-Operative Medicine
- Physical Medicine & Rehabilitation
- Plastic Surgery
- Podiatry
- Psychiatry
- Psychiatry, Geriatric
- Pulmonology
- Radiology
- Rheumatology
- Sleep Medicine
- STD/STI
- Thoracic Surgery
- Urogynecology
- Urology
- Vascular Surgery
- Wound Care

PRIMARY CARE

- Adolescent Medicine
- Complex Cases
- Family Medicine
- Geriatric Medicine
- Internal Medicine
- Pediatrics
- Urgent Care

PEDIATRICS SPECIALTIES

- Allergy & Immunology
- Behavioral Medicine, Child & Adolescent
- Cardiology
- Dermatology
- Eating Disorders, Adolescent
- Endocrinology
- Gastroenterology
- Hematology
- Infectious Disease
- Medical Genetics
- Neurology
- Otolaryngology
- Oncology
- Psychiatry, Child & Adolescent
- Radiology
- Rheumatology
- Urology

> “It helps me feel supported and improves not only my own decision making skills, but more importantly, improves the care for my patients.”
>
> — Clinic Provider

GET INVOLVED

Your support helps connect safety-net clinics with specialist expertise, education, and mentorship, so more patients can access the care they need, when they need it. There are many meaningful ways to support MAVEN Project.

DONATE

Fuel access to specialty care.

Your financial support helps us enhance our platform and expand our reach to more safety-net clinics across the nation. Every donation, no matter the size, makes a difference. Visit MAVENproject.org/donate to give in any of the following ways:

+ One-time or monthly donations
+ Donor-advised funds (DAFs)
+ Corporate partnership
+ Employer match
+ Stocks
+ Legacy gift

COLLABORATE

Partner with us to expand impact.

We’re always looking for partners to help improve our technology suite for consults, mentorship, and educational sessions. If your organization is interested in collaborating, please contact us at info@MAVENproject.org.

VOLUNTEER

Share your expertise where it’s needed most.

If you’re a physician specialist, join our network of volunteers and support primary care providers via:

+ Medical e-consults and video consults
+ Mentorship
+ Educational sessions

Learn more and apply at MAVENproject.org/join

SUPPORT

Champion our mission with your community.

There are many ways to support our mission beyond financial contributions:

+ Host a fundraising event
+ Spread the word about our work
+ Introduce potential clinic partners or volunteers

If you’re interested in supporting MAVEN Project in additional ways, please contact us at info@MAVENproject.org.

FOLLOW:

Stay connected to stories and opportunities.

Stay updated on our latest news, success stories, and opportunities to get involved:

MAVEN Project

MAVEN Project

@MAVENprojectorg

Help MAVEN Project build a community that shares the best of medicine.

However you choose to get involved, you can help expand access to specialty care and strengthen the communities we serve.

MAVENproject.org