

CHAPTER 424**MEDICAL EDUCATION AND RECRUITMENT****§12101. Definitions**

As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

1. Authority. "Authority" means the Finance Authority of Maine.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

2. Chief executive officer. "Chief executive officer" means the Chief Executive Officer of the Finance Authority of Maine.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

3. Clinical education. "Clinical education" means any on-location teaching environment ranging from a one-to-one training between a physician and a medical student to a training in a health clinic or hospital with or without a residency program.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

4. Health professional shortage area. "Health professional shortage area" means an area in the State lacking in medical professionals as designated by the Commissioner of Health and Human Services.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW); PL 2003, c. 689, Pt. B, §7 (REV).]

5. Insufficient veterinary services. "Insufficient veterinary services" means an insufficient number of practitioners of veterinary medicine in either a veterinary specialty or a geographic area, as determined by the Commissioner of Agriculture, Conservation and Forestry.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW); PL 2011, c. 657, Pt. W, §6 (REV).]

6. Maine resident. "Maine resident" means a person who has been a resident of the State for a minimum of one year as determined by rule of the authority who shall consider:

A. Length of residence in Maine for other than tuition purposes; [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

B. Secondary school attended; [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

C. Legal residence of parents; [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

D. Place of voting registration, if registered to vote; [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

E. Place where taxes are paid; and [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

F. Other indicators established by the authority. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

7. Nonresident tuition. "Nonresident tuition" means tuition charged to persons who are not residents in the state where an institution of allopathic or osteopathic medical education with which the authority has a contract is located. If the institution makes no distinction between the tuition charged resident and nonresident students, then "nonresident tuition" means the tuition charged all students.
[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

8. Primary health care. "Primary health care" means general or family practice of medicine, general internal medicine, general pediatrics, general dentistry and obstetrics and gynecology.

[PL 1995, c. 117, Pt. D, §1 (AMD); PL 1995, c. 117, Pt. D, §3 (AFF).]

8-A. Qualifying Maine-based medical school program. "Qualifying Maine-based medical school program" means an allopathic or osteopathic medical school program affiliated with a medical school accredited by the Liaison Committee on Medical Education or its successor or the American Osteopathic Association or its successor in which:

A. An educational or health care institution located in this State participates in curriculum development and the selection of students for admission; [PL 2009, c. 410, §1 (NEW).]

B. No fewer than 10 students per class year are enrolled and in which these students are required to complete not less than one academic year of the medical school curriculum at facilities located in this State; [PL 2009, c. 410, §1 (NEW).]

C. Funds are raised through philanthropic resources and the private sector to match 100% of those funds appropriated or allocated by the State for scholarships under section 12103; and [PL 2009, c. 410, §1 (NEW).]

D. The program curriculum includes required clerkship experiences in and training and course completion in rural health care and primary care. [PL 2009, c. 410, §1 (NEW).]

[PL 2009, c. 410, §1 (NEW).]

9. Underserved group. "Underserved group" means a population group in the State receiving insufficient primary health care, as determined by the Commissioner of Health and Human Services. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW); PL 2003, c. 689, Pt. B, §7 (REV).]

10. Underserved specialty. "Underserved specialty" means a medical specialty in which there are insufficient practitioners either throughout the State or within a designated geographic area of the State, as determined by rule of the Commissioner of Health and Human Services. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW); PL 2003, c. 689, Pt. B, §7 (REV).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 1995, c. 117, §D1 (AMD). PL 1995, c. 117, §D3 (AFF). PL 2003, c. 689, §B7 (REV). PL 2009, c. 410, §1 (AMD). PL 2011, c. 657, Pt. W, §6 (REV).

§12102. Comprehensive programs

The chief executive officer shall administer the comprehensive programs established in this chapter and chapter 424-A to address the shortage of primary health care professionals and veterinarians in the State. The chief executive officer shall plan, evaluate and update the programs to ensure that Maine residents have access to medical education and veterinary education and that Maine residents have access to primary health care and to veterinary care for their animals. [PL 2023, c. 607, §13 (AMD).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 2009, c. 488, §1 (AMD). PL 2023, c. 607, §13 (AMD).

§12103. Access to Medical Education Program

1. Positions. The Access to Medical Education Program is established under this section. Under this program, the chief executive officer shall secure up to 21 positions annually for Maine students at schools of allopathic, osteopathic or veterinary medical education up to an aggregate of 84 positions. Five positions are for students of osteopathic medicine, 15 positions are for students of allopathic medicine and one position is for students of veterinary medicine. If there is an insufficient number of qualified applicants for positions in either allopathic or osteopathic medicine, the chief executive officer may increase or decrease the number of positions available in either discipline. The allopathic and osteopathic medicine positions are available only to eligible students commencing professional

education on or after January 1, 1993 and on or before September 30, 2009. The veterinary medicine positions are available only to eligible students commencing professional education on or after January 1, 1999 and on or before September 30, 2010. Commencing January 1, 2010, the chief executive officer may not secure any new positions for students at schools of allopathic or osteopathic medicine and shall secure only the number of positions necessary to allow students already occupying such positions as of January 1, 2010 to complete their remaining medical education, up to 3 years, at the institution. Commencing January 1, 2011, the chief executive officer may not secure a new position for a student at a school of veterinary medicine and shall secure only the number of positions necessary to allow students occupying such positions as of January 1, 2011 to complete their remaining medical education, up to 3 years, at the institution. Commencing July 1, 2013, the chief executive officer may not secure any further positions at schools of allopathic or osteopathic medicine under this section. Commencing July 1, 2014, the chief executive officer may not secure any further positions at a school of veterinary medicine under this section.

[PL 2009, c. 488, §2 (AMD).]

2. Application process. Students shall apply directly to an institution of allopathic, osteopathic or veterinary medical education with which the authority has a contract to secure positions.

[PL 1997, c. 765, §1 (AMD).]

3. Requirements. Each student obtaining a position in an institution of allopathic or osteopathic medical education shall enter into an agreement with the authority by which the student agrees during the student's medical education to complete clinical education in rural areas and health professional shortage areas of this State as provided in the contract between the institutions of medical education and the authority. Each student obtaining a position in an institution of veterinary medical education shall enter into an agreement with the authority by which the student agrees during the student's medical education to complete clinical education in an area determined to have insufficient veterinary services as provided in the contract between the institutions of veterinary medicine and the authority.

[PL 1997, c. 765, §1 (AMD).]

4. Repayment of tuition differential. A student receiving a position secured by the authority shall enter into an agreement with the authority promising to pay back to the authority any amounts expended by the authority that reduce the nonresident tuition to be paid by the student. Such an agreement must be on the same terms and conditions as the agreement required by section 12104.

[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 1997, c. 765, §1 (AMD). PL 2009, c. 410, §2 (AMD). PL 2009, c. 488, §2 (AMD).

§12103-A. Doctors for Maine's Future Scholarship Program

There is established the Doctors for Maine's Future Scholarship Program, referred to in this section as "the scholarship program," to provide a tuition subsidy of 50% of the cost of attendance annually, up to a maximum of \$25,000 per student annually, for eligible students who enter qualifying Maine-based medical school programs for the purpose of increasing the number of physicians in this State who practice in primary care, underserved specialties or underserved areas of the State. For the purposes of this section, "cost of attendance" means the tuition and fees applicable to an eligible student, together with estimated other expenses reasonably related to cost of attendance at a qualifying Maine-based medical school program. [PL 2009, c. 410, §3 (NEW).]

1. Eligibility. For purposes of this section, "eligible student" means a student who meets eligibility requirements set by the authority by rule that include at least the following:

A. The student is or will be enrolled in a qualifying Maine-based medical school program; and
[PL 2009, c. 410, §3 (NEW).]

B. The student has a substantial connection to the State as evidenced by factors such as prior education in this State, parental residence in this State and at least one year of non-education-related residence in this State. [PL 2009, c. 410, §3 (NEW).]

[PL 2009, c. 410, §3 (NEW).]

2. Priority. In awarding scholarships, the authority shall give priority to an eligible student who meets at least 2 of the following provisions:

A. The student has received a high school diploma, or its equivalent, in this State; [PL 2009, c. 410, §3 (NEW).]

B. The student has received a baccalaureate degree from a 4-year college or university in this State; and [PL 2009, c. 410, §3 (NEW).]

C. The legal residence of a parent of the student is in this State. [PL 2009, c. 410, §3 (NEW).]
[PL 2009, c. 410, §3 (NEW).]

3. Allocation. The total number of scholarships available under the scholarship program must be allocated equally among qualifying Maine-based medical school programs, except that a program may not be allocated more than the number of scholarships for which the program has raised matching funds as of January 1st immediately preceding the scholarship award.

[PL 2009, c. 410, §3 (NEW).]

4. Matching funds. Commencing January 1, 2013, if a qualifying Maine-based medical school program raises matching funds in an amount less than the amount of scholarship funds allocable to it under this section from the State for a given year or does not have a sufficient number of qualified applicants to fill the number of scholarships allocable to it, the number of scholarships allocated to that program must be reduced accordingly and scholarships must be reallocated for that year to students of other qualifying Maine-based medical school programs. Qualifying Maine-based medical school programs must use funds raised through philanthropic and private medical education fundraising to increase the number of scholarships available to eligible students and must use matching funds to provide no fewer than the number of scholarships allocated to the program by the State in a given academic year.

[PL 2009, c. 410, §3 (NEW).]

5. Notification. For each student receiving a scholarship under this section, the student's qualifying Maine-based medical school program must notify the authority of the location of the student's medical residency, specialty and place of employment for each of the 8 years after the student's graduation from the school.

[PL 2009, c. 410, §3 (NEW).]

6. Doctors for Maine's Future Scholarship Fund created. A nonlapsing, interest-earning, revolving fund under the jurisdiction of the authority, known as the Doctors for Maine's Future Scholarship Fund, and referred to in this subsection as "the fund," is created to carry out the purposes of this section. Any unexpended balance in the fund carries over for continued use under this section. The authority may receive, invest and expend on behalf of the fund money from gifts, grants, bequests and donations or other sources in addition to money appropriated or allocated by the State. Money in the fund must be invested by the authority, as provided by law, with the earned income to be added to the fund. Money received by the authority on behalf of the fund, except interest income, must be used for the purposes of this section; interest income may be used for such purposes or to pay student financial assistance administrative costs incurred by the authority.

[PL 2009, c. 410, §3 (NEW).]

SECTION HISTORY

PL 2009, c. 410, §3 (NEW).

§12104. Loans for medical education

The Health Professions Loan Program, referred to in this section as the "program," is established and is administered by the authority. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

1. Eligibility. Loans are available to Maine residents pursuing allopathic, osteopathic, veterinary and dentistry education and to Maine residents obtaining a first loan under this section for the pursuit of an education in optometry prior to January 1, 2011. To be eligible for a loan under this section, a person must meet eligibility criteria, established by rule of the authority, which at a minimum must require:

A. That the student show financial need for a loan; and [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

B. That priority be given to students:

(1) Who have previously received a loan pursuant to this section and who exhibit financial need as determined by the authority;

(2) Who are participants in the Access to Medical Education Program established in section 12103; or

(3) Who are participants in the Maine Veterinary Medicine Loan Program established in chapter 424-A. [PL 2009, c. 488, §3 (AMD).]

[PL 2009, c. 488, §3 (AMD).]

2. State contract students.

[PL 2009, c. 488, §4 (RP).]

2-A. Access to Medical Education Program students. As long as the student is otherwise eligible, a student occupying a position at a school of allopathic or osteopathic medicine pursuant to section 12103 that was secured by the chief executive officer on or before January 1, 2010 continues to be eligible for loans under the program under this section through June 30, 2013. As long as the student is otherwise eligible, a student occupying a position at a school of veterinary medicine pursuant to section 12103 that was secured by the chief executive officer on or before January 1, 2011 continues to be eligible for loans under the program under this section through June 30, 2014.

[PL 2009, c. 488, §5 (AMD).]

3. Maximum loan amount. The chief executive officer may establish the maximum loan amount and may provide for a different maximum loan amount for applicants in different categories.

[PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

4. Allocation of loan fund.

[PL 2009, c. 488, §6 (RP).]

5. Loan agreement for students obtaining first program loans prior to January 1, 2010 or January 1, 2011. This subsection applies to allopathic and osteopathic students under section 12103 who obtained their first program loan prior to January 1, 2010 and to all other students who obtained their first program loan prior to January 1, 2011. The student shall enter into a loan agreement that provides for the following.

A. Upon completion of professional education the student shall repay the loan in accordance with the following schedule.

(1) A loan recipient who does not obtain loan forgiveness pursuant to this section shall repay the entire principal portion of the loan plus simple interest at a rate to be determined by rule of the authority. Interest does not begin to accrue until the loan recipient completes medical education, including residency and internship. The authority may establish differing interest rates to encourage loan recipients to practice primary health care medicine in the State.

(2) Primary health care physicians and dentists practicing in a designated health professional shortage area, any physician practicing in an underserved specialty or any physician providing services to a designated underserved group are forgiven the larger of 25% of the original outstanding indebtedness plus any accrued interest or \$7,500 for each year of practice.

Primary health care physicians and dentists practicing in the State, but not practicing in a designated health professional shortage area, are forgiven the larger of 12.5% of the original outstanding indebtedness plus any accrued interest or \$3,750 for each year of practice.

(3) Veterinarians providing services to Maine residents with insufficient veterinary services are forgiven the larger of 25% of the original outstanding indebtedness plus any accrued interest or \$7,500 for each year of practice.

(4) Any student completing an entire residency at any primary health care residency program in the State is forgiven 50% of the original outstanding indebtedness for each year of practice in a designated health professional shortage area, as a physician practicing in an underserved specialty or as a physician providing services to an underserved group or 25% of the original outstanding indebtedness for each year of primary health care practice in the State. [PL 1995, c. 117, Pt. D, §2 (AMD); PL 1995, c. 117, Pt. D, §3 (AFF).]

B. Loans must be repaid over a term no greater than 10 years, except that the chief executive officer may extend an individual's term as necessary to ensure repayment of the loan. Repayment must commence when the loan recipient completes, withdraws from or otherwise fails to continue medical education. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW).]

C. The Department of Health and Human Services may require a loan recipient requesting forgiveness or an interest rate benefit under this section, excluding veterinarians, to report annually to the Department of Health and Human Services, office of rural health and primary care the following:

- (1) The number of Medicaid patients served by the loan recipient and the percentage of the loan recipient's overall service provided to Medicaid patients;
- (2) The number of instances in which a loan recipient accepted a Medicare assignment and the number of and basis for any rejections during the period of the report; and
- (3) The amount of time devoted by the loan recipient to practice in a public health clinic during the period of the report.

If the office of rural health and primary care determines that the level of service provided was not reasonable or if the loan recipient fails to provide the report by the date required, the loan recipient is not entitled to any loan forgiveness or interest rate benefit under this section for the year of the report. [PL 2009, c. 488, §7 (AMD).]

[PL 2009, c. 488, §7 (AMD).]

5-A. Loan agreement for students obtaining first program loans after January 1, 2010 or January 1, 2011. This subsection applies to students who are not eligible for loan agreements under subsection 5. The student shall enter into a loan agreement that provides for the following.

A. Upon completion of professional education the student shall repay the entire principal portion of the loan plus simple interest at a rate that may range from 0% up to a maximum to be determined by rule of the authority and depending upon the type and location of medical practice undertaken by the loan recipient. Interest does not begin to accrue until the loan recipient completes medical education, including residency and internship. The authority may establish differing interest rates to encourage loan recipients to provide primary health care or dentistry in certain areas of the State, or to certain underserved groups, to practice in underserved specialties or to provide veterinary

services in areas of the State with insufficient veterinary services as defined in chapter 424-A. [PL 2009, c. 488, §8 (NEW).]

B. Loans must be repaid over a term no greater than 10 years, except that the chief executive officer may extend an individual's term as necessary to ensure repayment of the loan. Repayment must commence when the loan recipient completes, withdraws from or otherwise fails to continue medical education. [PL 2009, c. 488, §8 (NEW).]

C. The Department of Health and Human Services may require a loan recipient requesting an interest rate benefit under this section, excluding veterinarians, to report annually to the Department of Health and Human Services, office of rural health and primary care the following:

- (1) The number of Medicaid patients served by the loan recipient and the percentage of the loan recipient's overall service provided to Medicaid patients;
- (2) The number of instances in which a loan recipient accepted a Medicare assignment and the number of and basis for any rejections during the period of the report; and
- (3) The amount of time devoted by the loan recipient to practice in a public health clinic during the period of the report. [PL 2009, c. 488, §8 (NEW).]

If the Department of Health and Human Services, office of rural health and primary care determines that the level of service provided was not reasonable or if the loan recipient fails to provide the report by the date required, the loan recipient is not entitled to any interest rate benefit under this section for the year of the report.

[PL 2009, c. 488, §8 (NEW).]

6. Deferments. Deferments may be granted for causes established by rule of the authority. Interest at a rate to be determined by rule of the authority must be assessed during the deferment. The student's total debt to the authority, including principal and interest, must be repaid either through return service, if eligible, or cash payments. The chief executive officer shall make determinations of deferment on a case-by-case basis. The decision of the chief executive officer is final.

[PL 2009, c. 488, §9 (AMD).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 1995, c. 117, §D2 (AMD). PL 1995, c. 117, §D3 (AFF). PL 2003, c. 689, §B6 (REV). PL 2009, c. 410, §4 (AMD). PL 2009, c. 488, §§3-9 (AMD).

§12105. Nonlapsing fund

1. Fund created. A nonlapsing, interest-earning, revolving fund under the jurisdiction of the authority is created to carry out the purposes of this chapter and chapter 424-A. The fund may be used only for the following purposes:

- A. Prior to July 1, 2013, to secure positions under section 12103 and make loans under section 12104 for allopathic and osteopathic medical students; [PL 2009, c. 488, §10 (NEW).]
- B. Prior to July 1, 2014, to secure positions under section 12103 and make loans under section 12104 for veterinary students; [PL 2009, c. 488, §10 (NEW).]
- C. Beginning January 1, 2011, to make loans under the Maine Veterinary Medicine Loan Program established in chapter 424-A; [PL 2009, c. 488, §10 (NEW).]
- D. Prior to July 1, 2014, to make loans under section 12104 to students who are not occupying positions secured under section 12103 and who obtain their first loan under section 12104 prior to January 1, 2011; and [PL 2009, c. 488, §10 (NEW).]

E. Beginning January 1, 2011, to make loans under section 12104 to students who have not received a loan under section 12104 prior to January 1, 2011. [PL 2009, c. 488, §10 (NEW).]

Beginning July 1, 2009, the authority shall use any unexpended balance of funds previously designated for the purchase of positions of allopathic or osteopathic medicine under section 12103 to fund scholarships awarded under section 12103-A. Any unexpended balance in the fund after the unused portion is redesignated to support the scholarships described in section 12103-A carries over for use under section 12104.

The authority may receive, invest and expend, on behalf of the fund, money from gifts, grants, bequests and donations, or other sources in addition to money appropriated or allocated by the State. Loan repayments under this chapter or chapter 424-A or other repayments to the authority under section 12103 or 12104 must be invested by the authority, as provided by law, with the earned income to be added to the fund. Money received by the authority on behalf of the fund, except interest income, must be used for such purposes; interest income may be used for such purposes or to pay student financial assistance administrative costs incurred by the authority.

[PL 2009, c. 488, §10 (RPR).]

2. Separate account authorized. The authority may divide each of the funds under subsection 1 and section 12103-A, subsection 6 into separate accounts it determines necessary or convenient for implementing this chapter or chapter 424-A, including, but not limited to, accounts reserved for the purchase of positions and accounts reserved for loans under this chapter or chapter 424-A and accounts reserved for scholarships under this chapter.

[PL 2009, c. 488, §11 (AMD).]

3. Allocation of repayments. The authority may allocate a portion of the annual loan repayments received under section 12104 for the purpose of recruiting primary health care physicians for designated health professional shortage areas and a portion of any loan repayments received under chapter 424-A for the purpose of recruiting veterinarians to areas of the State with insufficient veterinary services as defined in chapter 424-A. Those portions may be used:

A. To generate additional matching funds for recruitment of physicians for designated health professional shortage areas or veterinarians to areas with insufficient veterinary services as defined in chapter 424-A; or [PL 2009, c. 488, §12 (AMD).]

B. In accordance with criteria established by the authority, to encourage primary health care physicians to practice medicine in health professional shortage areas or to encourage veterinarians to practice in areas of the State with insufficient veterinary services as defined in chapter 424-A, as applicable. [PL 2009, c. 488, §12 (AMD).]

[PL 2009, c. 488, §12 (AMD).]

4. Borrowing permitted. The authority may borrow funds pursuant to chapter 417-B for application to the fund established in subsection 1 and may pledge all or part of the fund or any assets or revenues of the fund in connection with any such borrowing.

[PL 2001, c. 479, §2 (AMD).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 1993, c. 410, §EEEE3 (AMD). PL 2001, c. 479, §§1-2 (AMD). PL 2009, c. 410, §§5-7 (AMD). PL 2009, c. 488, §§10-12 (AMD).

§12106. Advisory Committee on Medical Education

(REPEALED)

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 2001, c. 417, §§21-24 (AMD). PL 2003, c. 689, §B7 (REV). PL 2009, c. 488, §13 (AMD). PL 2023, c. 607, §14 (RP).

§12107. Rules

The authority shall establish rules necessary to implement this chapter. The Commissioner of Health and Human Services shall develop rules for determining health professional shortage areas for the practice of primary health care medicine and dentistry, for determining the reasonableness of the service provided by loan recipients to Medicaid and Medicare patients and participation by loan recipients in public health clinics, for determining underserved groups and for determining underserved specialties. The Commissioner of Agriculture, Conservation and Forestry shall develop rules for the determination of insufficient veterinary services. The rules authorized by this section must be adopted in accordance with Title 5, chapter 375, subchapter II. [PL 1991, c. 830, §4 (NEW); PL 1991, c. 832, §10 (NEW); PL 2003, c. 689, Pt. B, §7 (REV); PL 2011, c. 657, Pt. W, §6 (REV).]

SECTION HISTORY

PL 1991, c. 830, §4 (NEW). PL 1991, c. 832, §10 (NEW). PL 2003, c. 689, §B7 (REV). PL 2011, c. 657, Pt. W, §6 (REV).

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