CHAPTER 435

MAINE AREA HEALTH EDUCATION CENTERS SYSTEM

§12851. Definitions

As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings. [PL 1991, c. 372, §2 (NEW).]

1. Center. "Center" means a community-based area health education center that is designated in accordance with section 12857 or that exists on the effective date of this chapter and contracts with the system. [PL 1991, c. 372, §2 (NEW).]

2. Committee. [PL 2001, c. 352, §7 (RP).]


SECTION HISTORY


§12852. System designation

The Area Health Education Center at the University of New England is designated as the system. The system operates statewide and consists of a program office at the University of New England College of Osteopathic Medicine and centers. The statewide consortium for health professions education and any regional area health education center that exists on the effective date of this chapter or any merged or successor entities of those agencies that meet federal area health education center requirements may become part of the system by contractual agreement. [PL 2001, c. 352, §8 (AMD).]

SECTION HISTORY


§12853. Mission

The mission of the system is to improve the distribution, supply, quality, utilization and efficiency of health personnel in underserved geographical, cultural or medical specialty areas of the State by encouraging the regionalization and decentralization of educational responsibilities, and to develop culturally appropriate clinical curriculums at participating health professions schools. The system shall implement educational system incentives to attract and retain health care personnel in underserved areas and for underserved cultural groups through the:

1. Preceptorships. Development and implementation of preceptorships and other education programs in underserved areas and with underserved cultural groups; [PL 1991, c. 372, §2 (NEW).]

2. Recruitment. Development and implementation of strategies to recruit representatives from underserved geographical and cultural areas into the health professions; [PL 1991, c. 372, §2 (NEW).]

3. Retention. Development and implementation of strategies to encourage health professionals to practice and to remain in practice in underserved geographical, cultural and medical specialty areas; and [PL 1991, c. 372, §2 (NEW).]
4. **Linkage.** Development and implementation of strategies to link cultural and educational resources of communities to the educational resources of participating health professions schools.
[PL 1991, c. 372, §2 (NEW).]

**SECTION HISTORY**


**§12854. System responsibilities**

The system shall: [PL 1991, c. 372, §2 (NEW).]

1. **Recruitment and retention.** Develop and implement strategies that support the efforts of state and private agencies to enhance recruitment and retention of health professionals in inadequately served geographical, cultural and medical speciality areas of the State;
[PL 1991, c. 372, §2 (NEW).]

2. **Recruitment of state residents.** Develop and implement strategies for enhancing the recruitment of state residents into health professions, especially those residents who are disadvantaged or members of insufficiently represented populations;
[PL 1991, c. 372, §2 (NEW).]

3. **Needs assessment.** Conduct studies, establish data management mechanisms and undertake any other activities that improve the State's ability to assess the need for health professionals and health profession education;
[PL 1991, c. 372, §2 (NEW).]

4. **Clinical and continuing education.** Develop and implement strategies for conducting clinical and continuing education programs for health professionals that use community-based and culturally appropriate curricula;
[PL 1991, c. 372, §2 (NEW).]

5. **Contracts.** Establish contractual relationships to carry out system plans with health profession education programs, the statewide consortium for health professions education, and centers;
[PL 1991, c. 372, §2 (NEW).]

6. **Assistance to centers.** Provide technical and administrative services to the centers and the statewide consortium for health professions education;
[PL 1991, c. 372, §2 (NEW).]

7. **System funds.** Manage system funds in accordance with policies developed under this chapter and develop and implement plans to raise public and private funds to promote the goals of the system;
[PL 1991, c. 372, §2 (NEW).]

8. **Coordination.** Coordinate the efforts of the system with state and federal health and education initiatives; and
[PL 1991, c. 372, §2 (NEW).]

9. **Annual report.** Beginning in 1992, submit a written report on or before November 15th of each year to the Governor, the President of the Senate and the Speaker of the House of Representatives. The report must include the following:

A. The fiscal status of the system and the status of contracts with regional centers and other system contractors; [PL 1991, c. 372, §2 (NEW).]

B. Information regarding education, outreach and training programs; [PL 1991, c. 372, §2 (NEW).]

C. Information regarding placement of health care personnel in inadequately served areas; [PL 1991, c. 372, §2 (NEW).]
D. An assessment of system accomplishments; and [PL 1991, c. 372, §2 (NEW).]


SECTION HISTORY

§12855. Director

The University of New England shall appoint a system director who meets federal area health education center requirements. The director is responsible for the administration of the system in accordance with policies established under this chapter. [PL 2001, c. 352, §9 (AMD).]

SECTION HISTORY

§12856. Maine Area Health Education Centers Advisory Committee (REPEALED)

SECTION HISTORY

§12857. Area health education centers; statewide consortium for health professions education

Each center is an autonomous unit of the system. Each center must be exempt from federal income taxation under the United States Internal Revenue Code of 1986, Section 501(a), pursuant to the United States Internal Revenue Code of 1986, Section 501(c)(3). Each center must have a governing board that includes a balance of health care providers or health profession educators and individuals who reflect the ethnic, cultural and geographical characteristics of the center's service area. [PL 1991, c. 372, §2 (NEW).]

Centers and the statewide consortium for health professions education are responsible to the system only for the programs and initiatives they agree to provide through contracts with the system and may develop initiatives, programs and contracts with other public and private agencies and educational institutions. [PL 1991, c. 372, §2 (NEW).]

SECTION HISTORY

§12858. Relationship of Maine Area Health Education Centers System to state health profession scholarship and loan programs

The system shall cooperate with health profession students and programs that receive state support through the Finance Authority of Maine or other state entities. The system may provide clinical training and other support to those students and programs as appropriate. [PL 1991, c. 372, §2 (NEW).]

SECTION HISTORY

§12859. Relationship of the Maine Area Health Education Centers System to other area health education center systems

This chapter does not prohibit an existing or proposed area health education center program from operating in the State separate from the system. [PL 1991, c. 372, §2 (NEW).]

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