

CHAPTER 273**HYPERTENSION****§1697. Work-site high blood pressure programs**

The Bureau of Health shall establish work-site high blood pressure programs at work sites that have not previously been providing regular high blood pressure programs to their employees in order to screen all employees, detect and confirm those who have elevated blood pressures, refer those with elevations to physicians for diagnosis and treatment and continue contact through the year with employees to determine their progress toward blood pressure control. The bureau shall promote new work-site high blood pressure programs for workers, allocate funds for program operation and periodically evaluate program effectiveness. Any such screening program shall be voluntary for both employer and employee. [PL 1983, c. 547, §1 (NEW).]

SECTION HISTORY

PL 1983, c. 547, §1 (NEW).

§1698. Providers of work-site high blood pressure programs

The Bureau of Health shall actively seek health care providers throughout the State to participate in identifying workers with high blood pressure and helping them control their disease through physician-prescribed treatment regimen. Standards of quality and criteria for awarding service contracts to health care providers shall be based on recommendations developed in partnership with the Maine High Blood Pressure Council, a statewide voluntary health council. The objective of these criteria will be to achieve high quality, cost-effective health programs which comply with state and federal standards. [PL 1983, c. 547, §1 (NEW).]

SECTION HISTORY

PL 1983, c. 547, §1 (NEW).

§1699. Community-based heart attack and stroke prevention programs

1. Heart attack and stroke prevention programs; establishment. The Bureau of Health shall establish a program to develop heart attack and stroke prevention programs in communities and regions throughout the State. The community programs shall:

A. Provide public education to schools, community groups and workplaces about cardiovascular risks; [PL 1989, c. 501, Pt. P, §25 (NEW).]

B. Provide blood pressure and cholesterol screening, referral and follow-up to the general public and workforce populations; and [PL 1989, c. 501, Pt. P, §25 (NEW).]

C. Provide smoking cessation programs for community members wishing to quit. [PL 1989, c. 501, Pt. P, §25 (NEW).]

[PL 1989, c. 501, Pt. P, §25 (NEW).]

2. Training; funding. The bureau shall provide training for communities in program development, conduct a statewide public awareness program about cardiovascular risks, allocate matching funds for community program operation and periodically evaluate program effectiveness. [PL 1989, c. 501, Pt. P, §25 (NEW).]

3. Rules. The bureau shall adopt rules in accordance with the Maine Administrative Procedure Act, Title 5, chapter 375, for distribution of funds to communities no later than 90 days after the effective date of this section; awards to communities shall begin no later than 180 days after the effective date of this section. The rules shall include a requirement that funded programs follow

accepted quality control standards and be periodically reviewed by organizations with experience in and knowledge of heart attack and stroke prevention.

[PL 1989, c. 501, Pt. P, §25 (NEW).]

SECTION HISTORY

PL 1989, c. 501, §P25 (NEW).

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