



TO OUR READERS 6

THE MARGARET
CHASE SMITH ESSAY

The Other Iraq

Wayne Meyers 8

FORUMS

NATIVE SOVEREIGNTY

Maine's Indian land claims settlement is nationally unique, and has had significant ramifications for Native American sovereignty in the state. Stephen Brimley reviews the passage, provisions, and impact of the Maine Indian Claims Settlement Act of 1980 on Maine's tribes. The settlement act provided some economic benefits and an increase in federally provided services, but Maine's Native Americans still face economic, health, and social problems. Donna Loring of the Penobscot Nation, anthropologist Lisa Neuman, and anthropologist-attorney Lawrence Rosen in their commentaries offer further, varying perspectives on Native American sovereignty in Maine and elsewhere in the United States.

Native American Sovereignty in Maine

Stephen Brimley 12

COMMENTARIES

Tribal-State Relations

Donna M. Loring 27

From Clean Water to Casinos: Why Sovereignty is Important to Native Americans

Lisa K. Neuman 30

Negotiating Difference

Lawrence Rosen 33

MAINE HOSPITAL COSTS

Hospitals are the largest single component of healthcare costs. Nancy Kane's study of Maine hospitals' financial performance was undertaken as a mandate of the Dirigo Health Reform Act. She reports here that Maine's hospital industry outperformed hospitals elsewhere during 1993–2003, but that there is major variability in financial performance among the state's hospitals. Mary Mayhew's commentary provides the perspective of the Maine Hospital Association, and D. Joshua Cutler gives his insights as a physician member of the Commission to Study Maine's Hospitals.

Financial Performance of Hospitals in Maine, 1993–2003

Nancy Kane 36

COMMENTARIES

Maine Community Hospitals: Providing High-Quality, Affordable Care

Mary C. Mayhew 52

A Physician's Perspective

D. Joshua Cutler 56

How Many Regional Medical Centers Can Maine Sustain? How Patient Hospital Utilization Can Help Define Structure

One important way to efficiently use healthcare resources and control costs is to have high-cost, high-tech equipment and specialized personnel located in a limited number of regional medical centers. Lars Rydell uses patient discharge information from the Maine Health Data Organization to suggest that Maine currently has only two hospitals that function as tertiary regional medical centers—Maine Medical Center in Portland and Eastern Maine Medical Center in Bangor. He suggests that policymakers need to consider whether Maine needs any more than two such centers, given its population base.

Lars H. Rydell 58

Mental Health Parity and Beyond: Aligning the Public and Private Systems of Care for People with Mental Illness

Maine is a pioneer in mandating comprehensive mental health coverage in private insurance plans. Kitty Purington gives an overview of federal and state legislation on mental health parity. She compares parity provisions under private plans in Maine with coverage under MaineCare (Medicaid), and discusses models to close the gap between the public and private spheres in the treatment of mental illness.

Kitty Purington 66

An Ecotourism Quality Label for Maine? Insights from Sweden's Nature's Best Initiative

Nature-based tourism may be one way to revitalize lagging rural economies. In this article, David Vail offers "food for thought" based on Sweden's recent development of an accreditation and branding process for ecotourism operations. Like Sweden, Vail suggests that Maine might be able to capture a market niche by establishing its own ecotourism quality label.

David Vail 76

Reinventing Rural Regions

Rural areas have been undergoing a fundamental transformation away from commodity and resource-based economies. In this edited keynote speech, Mark Drabenstott presents the top 10 ways to reinvent rural regions. Thinking regionally, he says, is key to all other strategies, which include developing competitive niches, creating business clusters, promoting local amenities, and transforming local governance.

Mark Drabenstott 88