

MDH - Public Health Services

MISSION

To protect, promote and improve the health and well-being of all Marylanders and their families through provision of public health leadership and through community-based public health efforts in partnership with local health departments, providers, community based organizations, and public and private sector agencies, giving special attention to at-risk and vulnerable populations.

VISION

A future in which all Marylanders and their families enjoy optimal health and well-being.

KEY GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

OFFICE OF HEALTH CARE QUALITY

<https://health.maryland.gov/ohcq/>

Goal 1. To minimize delays in handling serious complaint investigations in nursing home facilities.

Obj. 1.1 Annually, the Long Term Care Unit will initiate on-site investigation of complaints alleging actual harm within 10 work days.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Number of complaint investigations completed	1,160	1,407	1,022	522	300	440	660
Number of days to initiate investigation	47	51	35	34	33	36	26

Goal 2. To provide timely and comprehensive annual surveys for the continuing protection of individuals with developmental disabilities receiving services from agencies licensed by the Developmental Disabilities Administration.

Obj. 2.1 Annually, the Developmental Disabilities Unit will perform annual surveys at 100 percent of the licensed providers.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Number of licensed providers	231	231	241	253	276	287	304
Percentage of licensed providers with required annual survey	18%	34%	23%	36%	33%	48%	61%

Goal 3. To provide timely and comprehensive annual surveys of Assisted Living sites for the continuing protection of individuals receiving services from community-based assisted living providers.

Obj. 3.1 Annually, the Assisted Living Unit will perform 100 percent of required annual surveys.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Number of licensed sites	1,531	1,580	1,546	1,563	1,650	1,681	1,704
Percentage of licensed providers with required annual survey	65%	48%	51%	69%	48%	67%	78%

MDH - Public Health Services

PREVENTION AND HEALTH PROMOTION ADMINISTRATION

<https://phpa.health.maryland.gov>

INFECTIOUS DISEASE AND ENVIRONMENTAL HEALTH SERVICES

Goal 1. To reduce the incidence of infectious diseases in Maryland.

Obj. 1.1 On a calendar year basis, at least 80 percent of two-year-olds (the Centers for Disease Control (CDC) national goal for states) will have up-to-date immunizations.

Obj. 1.2 At least 85 percent of reported primary and secondary syphilis cases will be treated within 14 days.

Obj. 1.3 The rate of chlamydia in 15-24 year olds will not increase by any more than 20 percent of the calendar year 2015 rate. (Comparison: CDC 2015 U.S. national rate for 15-24 year olds was 2,231 cases per 100,000 population).

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Est.	2021 Est.	2022 Est.
¹ Percent of two-year-olds with up-to-date immunizations	73%	70%	74%	74%	72%	72%	72%
Rate of primary/secondary syphilis per 100,000 population	8.5	9.5	12.2	14.4	14.3	15.8	15.0
Percent of syphilis cases treated within 14 days	83%	81%	83%	85%	87%	85%	86%
Rate of chlamydia (# of cases/100,000 population), all ages	509.6	552.1	587.2	624.9	505.8	563.9	533.5
Percent change from calendar year 2015 (all ages)	11.5%	20.8%	28.5%	36.7%	10.7%	23.4%	16.7%
Rate of chlamydia (# of cases/100,000 population), 15- to 24-year-olds	2,547.5	2,760.0	2,986.7	3,212.9	2,528.2	2,818.6	2,666.8
Percent change from calendar year 2015 (15- to 24-year-olds)	11.8%	21.2%	31.1%	41.1%	11.0%	23.7%	17.1%
Number of cases of tuberculosis	221	207	209	210	210	210	210
Number of new HIV Diagnoses	1,121	1,053	1,024	931	919	851	783
Percent change from calendar year 2015	-6.3%	-12.0%	-14.4%	-22.2%	-23.2%	-28.8%	-34.5%
Number of new AIDS diagnoses	596	590	518	488	320	252	185
Percent change from calendar year 2015	-6.7%	-7.7%	-18.9%	-23.6%	-49.9%	-60.6%	-71.0%
Rate of HIV diagnoses	18.7	17.8	17.4	15.7	14.7	13.4	12.1
Rate of AIDS diagnoses	9.9	9.9	8.8	8.3	4.6	3.4	2.1

MDH - Public Health Services

FAMILY HEALTH AND CHRONIC DISEASE SERVICES

Goal 2. To improve the health status of Marylanders and their families by assuring the provision of quality primary, preventive and specialty care services.

Obj. 2.1 By calendar year 2021, the infant mortality rate will be no more than 5.7 per 1,000 live births for all races and 9.1 per 1,000 live births for African-Americans.

Obj. 2.2 By calendar year 2021, the percentage of infants born to women receiving prenatal care in the first trimester will be at least 78 percent.

Obj. 2.3 By calendar year 2021, the teen birth rate will be no more than 13 per 1,000 women.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Est.	2020 Est.	2021 Est.	2022 Est.
Infant mortality rate for all races	6.5	6.5	6.1	5.9	5.8	5.7	5.6
Infant mortality rate for African-Americans	10.4	10.9	9.9	9.1	9.4	9.1	8.9
Percent births with first trimester care	67.8%	69.6%	70.0%	69.9%	73.0%	75.0%	77.0%
Teen birth rate per 1,000 women, ages 15-19	15.9	14.2	14.1	13.9	14.1	13.8	13.0

Goal 3. To prevent chronic diseases and disabilities, detect cancer early, and ensure accurate public health surveillance.

Obj. 3.1 By calendar year 2021, reduce breast cancer mortality to a rate of no more than 20.3 per 100,000 persons in Maryland.

Obj. 3.2 By calendar year 2021, reduce the heart disease mortality rate in Maryland to a rate of no more than 142.4 per 100,000 persons of all races and 153.8 per 100,000 persons for African-Americans.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Est.	2020 Est.	2021 Est.	2022 Est.
Breast cancer mortality rate	21.3	21.6	21.2	24.6	24.5	24.4	24.3
Heart disease mortality rate for all races	164.6	164.8	162.1	159.5	155.0	152.4	149.8
Heart disease mortality rate for African Americans	190.0	192.7	190.0	185.5	179.2	176.5	173.8

Goal 4. Prevent overdose deaths through Naloxone distribution.

Obj. 4.1 Increase the number of bystander Naloxone administrations reported to PHPA by 15 percent from the 2016 baseline year.

Obj. 4.2 Increase the number of individuals trained in overdose response through the Overdose Response Program by 5 percent from the 2016 baseline year.

Obj. 4.3 Increase the number of Naloxone doses dispensed by PHPA to potential overdose bystanders by 10 percent from the prior year.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Number of bystander Naloxone administrations reported to PHPA	863	1,194	1,000	1,118	921	1,184	1,316
Percent increase over baseline year	N/A	38.4%	15.9%	29.5%	6.7%	37.2%	52.5%
Number of individuals trained in overdose response program	21,989	27,663	42,846	45,867	43,013	46,149	49,514
Percent increase over baseline year	N/A	25.8%	94.9%	108.6%	95.6%	109.9%	125.2%
Number of Naloxone doses dispensed by PHPA	26,771	35,538	46,547	106,992	93,583	102,941	112,300
Percent increase over baseline year (PHPA)	N/A	32.7%	73.9%	299.7%	249.6%	284.5%	319.5%
Number of Naloxone doses dispensed by MCPA	3,514	9,387	14,058	18,859	22,979	24,358	25,576
Percent increase over baseline year (MCPA)	N/A	167.1%	300.1%	436.7%	553.9%	593.2%	627.8%

MDH - Public Health Services

CIGARETTE RESTITUTION FUND - CANCER PREVENTION, EDUCATION, SCREENING AND TREATMENT PROGRAM

Goal 5. To reduce overall cancer mortality in Maryland.

Obj. 5.1 By calendar year 2021, reduce overall cancer mortality to a rate of no more than 140.7 per 100,000 persons (age-adjusted to the 2000 U.S. standard population).

Obj. 5.2 By calendar year 2021, reduce colorectal cancer mortality to a rate of no more than 12.6 per 100,000 persons in Maryland (age-adjusted to the 2000 U.S. standard population).

Goal 6. To reduce disparities in cancer mortality between ethnic minorities and whites.

Obj. 6.1 By calendar year 2018, ensure disparities in overall cancer mortality between blacks and whites are at a rate of no more than 1.09 (age adjusted to the 2000 U.S. standard population).

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Est.	2020 Est.	2021 Est.	2022 Est.
Overall cancer mortality rate	156.6	151.5	150.0	144.6	142.2	139.9	137.6
Colorectal cancer mortality rate	14.2	13.7	13.6	13.4	13.3	13.1	13.0
Cancer death rate ratio between blacks/whites	1.2	1.1	1.2	1.1	1.1	1.1	1.1

CIGARETTE RESTITUTION FUND - TOBACCO USE PREVENTION AND CESSATION PROGRAM

Goal 7. To reduce the proportion of Maryland youth and adults who currently smoke cigarettes.

Obj. 7.1 By the end of calendar year 2020, reduce the proportion of under-age Maryland middle and high school youth that currently smoke cigarettes by 87.7 percent and 67.5 percent, respectively, from the calendar year 2000 baseline rate.

Obj. 7.2 By the end of calendar year 2020, reduce the proportion of Maryland adults that currently smoke cigarettes by 31.9 percent from the calendar year 2011 baseline rate.

Obj. 7.3 Reduce the proportion of Maryland middle and high school youth that currently use any tobacco products by 5.6 percent and 1.8 percent, respectively, from the calendar year 2018 rate.

Obj. 7.4 Reduce the proportion of Maryland middle and high school youth that currently use electronic smoking devices (ESDs) by 8.5 percent and 2.2 percent, respectively, from the calendar year 2018 rate.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Est.	2020 Est.	2021 Est.	2022 Est.
Middle school students who currently smoke cigarettes	1.3%	N/A	1.1%	N/A	N/A	0.9%	0.7%
High school students who currently smoke cigarettes (all ages)	8.2%	N/A	7.7%	N/A	N/A	4.5%	4.0%
Percent of adults who currently smoke cigarettes	13.7%	13.8%	12.5%	12.7%	12.2%	11.7%	11.2%
Percentage change in the number of Maryland middle school youth using tobacco products	N/A	N/A	9.0%	N/A	N/A	8.5%	8.0%
Percentage change in the number of Maryland high school youth using tobacco products	N/A	N/A	27.4%	N/A	N/A	26.9%	26.4%
Percentage change in the number of Maryland middle school youth using ESDs	N/A	N/A	5.9%	N/A	N/A	5.4%	4.9%
Percentage change in the number of Maryland high school youth using ESDs	N/A	N/A	23.0%	N/A	N/A	22.5%	22.0%

MDH - Public Health Services

Goal 8. To reduce the prevalence of current smoking among minority populations.

Obj. 8.1 By the end of calendar year 2020, reduce the proportion of African-American adults who currently smoke cigarettes by 31.2 percent from the calendar year 2011 baseline rate.

Obj. 8.2 By the end of calendar year 2020, reduce the proportion of Hispanic adults who currently smoke cigarettes by 54.8 percent from the calendar year 2011 baseline rate.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Est.	2021 Est.	2022 Est.
Percent of adult African Americans who smoke cigarettes	13.7%	15.1%	13.7%	12.5%	12.0%	11.5%	11.0%
Percent of adult Hispanics who currently smoke cigarettes	10.2%	12.8%	6.8%	9.3%	9.0%	8.7%	8.4%

OFFICE OF THE CHIEF MEDICAL EXAMINER

<https://health.maryland.gov/ocme>

Goal 1. Provide timely death investigation with sensitivity and balance towards family members.

Obj. 1.1 99 percent of all medical examiner cases requiring further examination will be examined and ready for release within 24 hours of admission to the Office of the Chief Medical Examiner.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Total deaths investigated	13,571	14,592	15,716	15,346	16,779	16,000	16,000
Cases examined	5,099	5,613	5,676	5,738	6,004	6,000	6,000
Percent of cases released within 24 hours	99%	99%	99%	99%	98%	99%	99%

Goal 2. Provide State's Attorneys with autopsy reports on all medical examiner cases where further investigation is deemed advisable.

Obj. 2.1 85 percent of all autopsy reports will be completed and forwarded, when necessary, to the State's Attorney's office within 60 working days following the

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Examinations performed	5,099	5,613	5,676	5,738	6,004	6,000	6,000
Number of Medical Examiners (full-time equivalent)	15	18	17	20	19	20	20
Percent of reports completed within 60 days	76%	81%	85%	83%	83%	85%	85%
Ratio of autopsies to Medical Examiners	340	321	334	283	310	300	300

MDH - Public Health Services

OFFICE OF PREPAREDNESS AND RESPONSE

<https://preparedness.health.maryland.gov>

Goal 1. To improve Maryland's ability to maintain operational readiness to respond to public health emergencies by achieving the planning and operations standards set forth by the Centers for Disease Control and Prevention (CDC) Medical Countermeasure (MCM) Operational Readiness Review (ORR) Guidance.

- Obj. 1.1** To achieve a level of readiness no less than "established" on at least 90 percent of the preparedness planning elements on the CDC MCM Operational Readiness Review Tool.
- Obj. 1.2** To ensure all Local Health Departments' (LHDs) readiness will be no less than "established" on at least 90 percent of the preparedness planning elements on the CDC MCM Operational Readiness Review Tool.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Percent of preparedness planning elements scored as "established" Maryland receives on the State ORR	85%	85%	N/A	100%	100%	100%	100%
Percent of LHDs with 90 percent of preparedness planning elements rated as "established" on the ORR	50%	50%	0%	71%	71%	85%	90%

Goal 2. To integrate long-term care facilities into the all hazard preparedness and response planning.

- Obj. 2.1** To increase the representation of long-term care facilities in the regional healthcare coalitions.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Percentage of long-term care facilities actively engaged in all hazard emergency preparedness planning with their jurisdiction's regional healthcare coalition	N/A	N/A	N/A	N/A	N/A	N/A	40.0%

Goal 3. To improve availability and utilization of Maryland Responds volunteers for state and local public health emergencies.

- Obj. 3.1** To increase the number of deployable Maryland Responds volunteers for state and local public health emergencies.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Annual percentage increase of deployable volunteers also known as "Ready Responders"	14.6%	14.9%	15.6%	15.4%	30.8%	70.0%	85.0%

MDH - Public Health Services

OFFICE OF POPULATION HEALTH IMPROVEMENT

<https://pophealth.health.maryland.gov>

Goal 1. Reduce underage drinking in Maryland through planning, coordination, and delivery of prevention services to all Maryland residents, applying evidence-based principles, strategies, and model programs with a focus on citizens under age 21.

Obj. 1.1 The National Survey on Drug Use and Health (NSDUH) report on state estimates of substance use and mental disorders will show a decline in the estimate of Maryland citizens in the 12 to 20 age range who used alcohol in the past month.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Est.	2021 Est.	2022 Est.
² Number of Maryland citizens aged 12 to 20	715,260	715,260	658,996	658,996	N/A	N/A	N/A
² Those aged 12 to 20 who used alcohol in the past month	136,615	136,615	126,000	123,891	N/A	N/A	N/A
² Percent of those aged 12 to 20 who used alcohol in the past	19.1%	19.1%	19.1%	18.8%	N/A	N/A	N/A

OFFICE OF PROVIDER ENGAGEMENT AND REGULATION

<https://health.maryland.gov/ocsa>

Goal 1. To improve the prescribing and dispensing of Controlled Dangerous Substances (CDS).

Obj. 1.1 Annually, ensure all prescribers with a CDS registration are Prescription Drug Monitoring Program (PDMP) -registered.

Obj. 1.2 Annually, ensure that there are at least one million PDMP queries per quarter by clinical users.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Est.	2021 Est.	2022 Est.
Percentage CDS Registrant Prescribers that are PDMP-	N/A	N/A	N/A	86%	85%	95%	98%
Average number of clinical user queries per fiscal year quarter	N/A	N/A	N/A	3,528,371	4,778,859	4,850,000	5,000,000

Goal 2. To increase the number of CDS registrants using the Office of Controlled Substances Administration (OCSA) online CDS Renewal Service to renew their registration and thus decrease the registration turn-around time.

Obj. 2.1 Annually, at least 85 percent of all CDS registrants renewing a CDS registration will utilize the OCSA online CDS renewal service.

Obj. 2.2 Annually, the average turn-around time for a CDS registration renewal will not exceed 10 days.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Est.	2021 Est.	2022 Est.
Total number of online CDS registration renewals	N/A	N/A	N/A	9,025	12,349	11,200	13,000
Total number of paper application renewals	N/A	N/A	N/A	680	1,914	400	0
Total number of CDS registration renewals	N/A	N/A	N/A	9,705	14,263	8,000	15,000
Percent online registration renewals/ total registration renewals	N/A	N/A	N/A	93%	87%	95%	100%
Average turn-around time for a CDS registration renewal	N/A	N/A	N/A	11	19	17	8

MDH - Public Health Services

Goal 3. To provide timely and comprehensive regulatory oversight of registrants to ensure CDS are available for legitimate medical and scientific purposes and to protect, promote and maintain the health and welfare of the people of the State of Maryland.

Obj. 3.1 Annually, the actual number of total inspections conducted will exceed estimated projection of total inspections by at least 5 percent.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Pharmacy inspections performed	220	210	236	332	596	400	630
Other CDS establishment inspections performed	377	348	339	109	871	700	905
Dispensing inspections performed	695	64	661	1,097	430	300	670
Total number of inspections performed	1,292	622	1,236	1,538	1,897	1,400	2,205
Projected number of inspections to be performed	1,300	1,400	1,145	1,175	1,225	1,400	2,205
Percent increase: actual inspections/ projected inspections	-1%	-56%	8%	31%	55%	0%	0%

LABORATORIES ADMINISTRATION

<https://health.maryland.gov/laboratories>

Goal 1. Adopt cutting edge scientific technology to improve the quality and reliability of public health laboratory practice for prevention of disease and promotion of health.

Obj. 1.1 Annually maintain the number of new tests developed or validated and implemented to detect and characterize emerging and reemerging infectious diseases, bioterrorism, anti-microbial and anti-viral drug resistance agents in clinical specimens, and chemical, radiological, microbiological contaminants in environmental matrices.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Number of genetic amplification techniques	32	34	36	38	40	40	40

Goal 2. Promote quality and reliability of laboratory test results to support public health, environmental, and BT/CT programs.

Obj. 2.1 Annually maintain accuracy of 90 percent or greater for proficiency testing of infectious bacterial disease, viral disease, newborn screening for hereditary disorders, environmental, and bleeding time/clotting time (BT/CT) based on nationally standardized testing programs.

Performance Measures	2016 Act.	2017 Act.	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.
Percent accuracy of environmental testing in proficiency testing	98%	94%	98%	98%	98%	98%	98%

NOTES

¹ CDC has recently changed the reporting method for the National Immunization Survey. Data presented in 2019 now is reported by birth year (birth cohort) rather than survey date. Previous data was by survey date.

² The grant tied to these measures expired in September 2020.