



**MDH ATTENDEES:** Laura Herrera Scott, MD, MPH, Secretary  
Nilesh Kalyanaraman, MD, Deputy Secretary, Public Health Services  
Amalie Brandenburg, MDH Chief Financial Officer

Available For Questions: Nilesh Kalyanaraman, MD, Deputy Secretary, Public Health Services

**Maryland Department of Health (MDH) Public Health Administration**  
**Fiscal Year 2025 Operating Budget**  
**Response to Department of Legislative Services Analysis**

**House Appropriations Committee**  
**Health and Social Services Subcommittee**  
**Delegate Emily Shetty**  
**February 15, 2024**

**Senate Budget and Taxation Committee**  
**Health and Human Services Subcommittee**  
**Senator Cory McCray**  
**February 19, 2024**

The Department thanks the Governor, the Department of Budget and Management (DBM), and the Budget Committees for their support. We thank the Department of Legislative Services for its insightful budget analysis and for its recommendations to concur with the Governor's allowance.

**MDH should provide a breakout of new positions and their functions, indicating which positions were created through contractual conversion in fiscal 2024 through BPW authorizations and which will be converted in fiscal 2025.**

See table below for an explanation of all 115 new state merit positions included in PHA’s FY 2025 Allowance.

<b>Public Health Administration</b>		
<b>Initiative</b>	<b>Number of New PINs</b>	<b>Purpose</b>
Public Health Infrastructure Grant Positions For FY2025	18 new positions that span MDH, including positions in: <ul style="list-style-type: none"> <li>● Human resources</li> <li>● Data modernization</li> <li>● Health Policy</li> <li>● Environmental health</li> <li>● Grant administration</li> <li>● Training Development</li> <li>● Quality Improvement</li> <li>● Performance Management</li> <li>● Violence prevention</li> </ul>	The Public Health Infrastructure Grant (PHIG) is a federally funded grant that supports staffing, infrastructure, and public health initiatives to better provide essential public health services to Maryland residents.
Existing SPP Positions for contractual conversion in FY2025	78 new PINs <ul style="list-style-type: none"> <li>● 73 in the Deputy Secretary for Public Health Services</li> <li>● 1 in Office of Population Health Improvement</li> <li>● 5 in the Office of Preparedness and Response</li> </ul>	These new positions come from a variety of new Federal funding sources that support and improve the public health workforce at the state, local, and community levels. Programs and services span MDH to strengthen recruitment, retention, and training; improve the delivery of foundational public health services to Maryland communities; modernize data systems; and collect and use data to take action to prevent overdoses. Most positions are filled or in recruitment.

<p>Maryland Commission on Health Equity</p>	<p>1 new PIN</p>	<p>Advancing health equity is a critical priority of the Governor and MDH. The Maryland Commission on Health Equity works to collaboratively implement policies and laws to reduce health disparities and increase health equity across the state. Per statute, MDH is required to lead and staff the Commission. MDH has requested a position for this work.</p>
<p>Existing Positions authorized for contractual conversion by BPW on October 25, 2023</p>	<p>18 new PINs:</p> <ul style="list-style-type: none"> <li>● 8 positions for the Vital Statistics Administration</li> <li>● 3 positions for Office of Controlled Substances</li> <li>● 1 position in the Office of Population Health Improvement</li> <li>● 5 positions in the Office of Preparedness and Response</li> </ul>	<p>These are existing SPP positions which have been filled for at least 6 months. Moving these individuals into Merit PINs helps retain PHA talent and decrease vacancies and turnover in these critical positions.</p>

**MDH should clarify the number of vacancies in offices included in the PHA budget and explain which of the vacancies are in positions created by contractual conversion in fiscal 2024.**

There are a total of 68 vacancies in PHA. Of these, 50 are vacancies in existing positions in PHA in various stages of recruitment. The other 18 positions are contractual conversions authorized by BPW on October 25, 2023.

The table below summarizes the vacancies by office as of December 31, 2023 as well as the location of the contractual conversion positions. The October 25, 2023 authorization included only filled contractual positions which will be moved into new Merit PINs being provided by DBM.

<b>Office</b>	<b>Vacancies as of Dec 31</b>	<b>Contractual Conversion positions</b>
Executive Direction - Deputy Secretary for Public Health Services	11	12
Office of Population Health Improvement	1	1
Office of the Chief Medical Examiner	13	0
Office of Preparedness and Response	4	5
Laboratory Services	21	0

**MDH should comment on any operational and staffing impacts on the department overall and on OCME due to the transfer of responsibilities from the Postmortem Advisory Committee.**

Prior to July 1, 2023, the part time Postmortem Examiners Commission (PMEC) was responsible for personnel and staffing while the Department was responsible for day to day oversight and effectuating PMEC decisions. This led to challenges and delays in managing personnel. Since the July 1 transfer of responsibilities from the newly renamed Postmortem Examiners Advisory Committee (PEAC) to the Department, administration and oversight of the OCME has been streamlined making it easier for the Department to manage OCME and be responsive to emerging needs. At the same time, the PEAC continues to provide advice as needed on larger issues affecting the OCME.

**OCME should discuss additional requirements of the settlement, including changes to operating or reporting procedures.**

The settlement required a “Right to Request Correction” cover letter to accompany all outgoing Autopsy Reports, which was implemented in December 2023. The OCME website was also updated in December 2023 to include the “Right to Request Correction” process (<https://health.maryland.gov/ocme/Pages/Autopsy-Reports.aspx>). The policy updates on “in-

custody deaths during law enforcement restraint” did not impose an operational impact, as what was implemented was already informally being followed. The policy updates include quality assurance procedures of presentation of these cases at consensus conference, review of the finalized cases by an administrative medical examiner, impartiality of investigation, and reference to National Association of Medical Examiners (NAME) resources addressing deaths in custody.

**Due to inconsistencies in calculating the formula in recent years, the Department of Legislative Services (DLS) recommends adding language restricting funds pending a report on the LHD funding formula methodology and recent application of the methodology.**

The Department concurs with the report.



# Public Health Administration Fiscal Year 2025 Budget Hearings

February 2023



# Public Health Administration

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- Local Health Departments
- Office of the Chief Medical Examiner
- Laboratories Administration
- Vital Statistics Administration
- Office of Population Health Improvement
- Office of Provider Engagement and Regulation
- Office of Preparedness and Response
- State Anatomy Board

# Local Health Departments

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Local Health Departments (LHD) in each of the 24 jurisdictions promote health and prevent disease through education, advocacy, linkage to resources and treatment to improve the quality of life for Maryland residents.

LHDs are funded through state, local and federal funds.

## **Some of the Programs and Services Typically Included are:**

- Diabetes and cancer prevention
- Vaccination clinics
- Healthcare and insurance access
- Environmental health services
- Infectious Disease Investigation
- Local Addiction Authority

The full set of services offered vary by LHD



# Office of the Chief Medical Examiner

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*Statewide agency responsible for the investigation of all sudden and unexpected deaths in the State, including all non-natural deaths that occur due to injury, suspicious circumstances, and/or not in the attendance of a physician*

## Highlights

- Hired Chief Medical Examiner
- Cleared backlog of cases with 90% of cases completed in 90 days
- Maintenance of accreditation
  - National Association of Medical Examiners (NAME)
  - Accreditation Council for Graduate Medical Education (ACGME)
- Increased salaries for Medical Examiners to improve recruitment and retention

## Key initiatives/priorities:

- IT modernization
  - Upgrading current medicolegal death investigation database
- Procurement to support growth and standard of care
  - Cold storage buildout
  - Postmortem radiology -- full-body x-ray replacement
  - Laboratory information management system (LIMS) for in-house toxicology laboratory

# Laboratories Administration

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- **Division of Newborn Screening:** Expanded screening for Maryland newborns by introducing a test for X-linked Adrenoleukodystrophy (X-ALD)
- **Division of Microbiology:** Aided in the treatment of invasive infections in immunocompromised patients by developing an antifungal drug susceptibility assay to screen *Aspergillus fumigatus* isolates for resistance
- **Division of Virology/Immunology:** Developed multiplex PCR assays to expand statewide year-round influenza virus surveillance
- **Division of Environmental Sciences:** Collaborate with state agencies, EPA, and FDA for PFAS testing, as Maryland's sole PFAS-testing facility
- **Division of Molecular Biology:** Responded to the rising incidence of tick-borne infections often misdiagnosed as malaria by implementing a lab-developed, real-time PCR test to identify *Babesia microti* quickly and accurately from suspected malaria cases

# Vital Statistics Administration

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- Vital Statistics
  - The Division of Health Statistics compiles and publishes reports based on vital records registered each year for Maryland residents including the annual report.
- Vital Records
  - Issues copies of birth, death, fetal death, and marriage certificates (2007 – present) for events that occur in Maryland

# Office of Population Health Improvement

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- Programs addressing health care access and the recruitment and retention of health care professionals in rural and shortage areas
  - Maryland Loan Repayment Programs; Tax Credit for Preceptors Programs; Conrad 30 J-1 Visa Waiver
  - State Office of Rural Health; Health Professional Shortage Areas
- Community health worker program
  - Focus on expanding access to training
- Expanding focus on state health care workforce
  - Health Care Workforce Data Center planning activities

# Office of Provider Engagement and Regulation

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**OPER** provides a center of support for prescribers and dispensers to better promote professional education, informed clinical decision-making, best practices and innovation so that Maryland patients experience optimal access, efficacy and safety in connection with controlled substances.

**Prescription Drug Monitoring Program (PDMP):** The Office of the PDMP supports healthcare providers and their patients in the safe and effective use of prescription drugs. It serves as a core component of the State's and many local jurisdictions' strategies for reducing drug-related overdoses.

- Collects and securely stores information on drugs that contain controlled substances and are dispensed to patients in Maryland.
- The Provider Outreach and Education unit provides resources for safe and effective prescribing of controlled substances.

**Key Initiatives/Priorities:** Enhancements to the PDMP that address reporting compliance and dispenser errors. Continued outreach to providers and dispensers regarding the available tools within the CRISP Portal.

**Office of Controlled Substances Administration (OCSA):** Enforces the Controlled Dangerous Substance (CDS) Act and ensures the availability of drugs for legitimate medical and scientific purposes.

- Issues CDS permits to practitioners, researchers and establishments that administer, prescribe, dispense, distribute, manufacture, conduct research and conduct chemical analysis of CDS.
- Inspects practitioners and establishments for compliance with the Controlled Substances Act
- Provides education and enforces the Controlled Substances Act for practitioners and establishments that are non-compliant.

**Key Initiatives/Priorities:** Enhancements to the OCSA website to provide educational resources surrounding controlled substances.

# Office of Preparedness and Response

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*Coordinates the state's public health and medical response during an emergency*

Key Priorities:

- Develop new non-fatal overdose analysis and reports for Overdose Data To Action (OD2A) partners
- Integrate and realign Maryland's Healthcare Coalition
- Deploy an upgraded MD Responds Medical Reserve Corps volunteer management system
- Optimize the disposition of surplus supplies and equipment through the consolidation of warehouse operations
- Design and build the MDH Emergency Operations Center (EOC)
- Acquire and implement an Inventory Management System for State/Local/Coalition inventory integration
- Coordinate Post-COVID emergency preparedness and response Strategic Planning
- Develop and evaluate Continuity of Operations Plans (COOP) for MDH Healthcare Facilities
- Prepare and coordinate the execution of the Hazard-Vulnerability Assessment (HVA) for Maryland's healthcare community
- Collaborate with Maryland's public health community to execute a state and jurisdictional risk assessment (JRA)

# State Anatomy Board (SAB)

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## Priorities

- Manage with care and dignity the decedent affairs of all who have donated themselves to the Maryland State Anatomy Board
- Provide a cremation and burial for unclaimed decedents

## Current Initiatives

- Update and expand clinical training spaces & services
- Modernize IT data security and management
- Strengthen public and client services

*To manage with care and dignity of those who lack the means to manage their final affairs and to provide for all those who have donated themselves to positively impact research and improve public health for generations to come.*