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 immediate jeopardy within 2 working days.

Performance Measures	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
[1] Number of complaint investigations completed	N/A	N/A	N/A	8	N/A	N/A	N/A
[1] Number of days to initiate investigation	N/A	N/A	N/A	1	N/A	N/A	N/A

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
[1] Number of licensed providers	241	253	276	304	N/A	N/A	N/A
[1] Percentage of licensed providers with required annual survey	23%	36%	33%	33%	N/A	N/A	N/A

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
[1] Number of licensed sites	1,546	1,563	1,650	1,672	N/A	N/A	N/A
[1] Percentage of licensed providers with required annual survey	51%	69%	48%	54%	N/A	N/A	N/A

Goal 4. **To timely initiate all focused infection control surveys in nursing homes.**

 Obj. 4.1 Annually, the Long Term Care Unit will initiate all focused infection control surveys in nursing homes within the time frame required by the Centers for Medicare & Medicaid Services.

Performance Measures	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
[1] Number of complaint investigations required	N/A	N/A	N/A	203	N/A	N/A	N/A
[1] Percentage of focused infection control surveys initiated within the required time frame	N/A	N/A	N/A	1	N/A	N/A	N/A

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
[2,3] Percent of two-year-olds with up-to-date immunizations	74%	75%	76%	N/A	77%	78%	79%
[4] Rate of primary/secondary syphilis per 100,000 population	12.2	14.4	14.4	N/A	N/A	14.6	14.8
[4] Percent of syphilis cases treated within 14 days	83%	85%	85%	N/A	N/A	83%	84%
[4] Rate of chlamydia (# of cases/100,000 population), all ages	586.3	625.2	535.9	N/A	N/A	575.0	589.0
[4] Percent change from calendar year 2015 (all ages)	28.3%	36.8%	17.3%	N/A	N/A	25.8%	28.9%
[4] Rate of chlamydia (# of cases/100,000 population), 15- to 24-year-olds	2,986.7	3,212.9	3,109.9	N/A	N/A	3,300.0	3,350.0
[4] Percent change from calendar year 2015 (15- to 24-year-olds)	31.1%	41.1%	36.5%	N/A	N/A	44.9%	47.1%
Number of cases of tuberculosis	209	210	148	195	200	200	200
Number of new HIV Diagnoses	1,024	928	874	803	733	662	591
Percent change from calendar year 2015	-14.4%	-22.4%	-26.9%	-32.9%	-38.7%	-44.6%	-50.6%
Number of new AIDS diagnoses	524	482	352	287	222	157	92
Percent change from calendar year 2015	-18.0%	-24.6%	-44.9%	-55.1%	-65.3%	-75.4%	-85.6%
Rate of HIV diagnoses	17.4	15.6	12.2	12.9	11.5	10.2	8.8
Rate of AIDS diagnoses	8.8	8.3	5.2	4.2	3.0	1.8	0.6

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
Infant mortality rate for all races	6.1	5.9	5.8	6.1	5.9	6.0	5.9
Infant mortality rate for African-Americans	9.9	9.1	9.4	9.4	10.0	10.1	9.9
Percent births with first trimester care	70.0%	69.9%	73.0%	70.0%	70.1%	70.2%	70.1%
Teen birth rate per 1,000 women, ages 15-19	14.1	13.9	14.1	13.3	12.9	12.8	12.7

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
[5] Breast cancer mortality rate	21.2	19.5	21.5	19.2	21.3	21.0	20.8
[5] Heart disease mortality rate for all races	162.1	159.5	155.0	168.3	161.3	160.2	159.1
[5] Heart disease mortality rate for African Americans	190.0	187.7	179.2	202.9	188.1	186.8	185.4

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Number of bystander Naloxone administrations reported to PHPA	1,000	1,118	921	1,435	1,190	1,249	1,311
Percent increase over baseline year	15.9%	29.5%	6.7%	66.3%	37.9%	44.7%	51.9%
Number of individuals trained in overdose response program	42,846	45,867	43,013	57,796	79,131	87,044	95,748
Percent increase over baseline year	94.9%	108.6%	95.6%	162.8%	259.9%	295.9%	335.4%
Number of Naloxone doses dispensed by PHPA	46,547	106,992	93,583	156,817	213,583	234,942	258,436
Percent increase over baseline year (PHPA)	73.9%	299.7%	249.6%	485.8%	697.8%	777.6%	865.4%
Number of Naloxone doses dispensed by MCPA	14,058	18,859	22,979	28,617	33,387	38,229	43,071
Percent increase over baseline year (MCPA)	300.1%	436.7%	553.9%	714.4%	850.1%	987.9%	1125.7%

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
[5] Overall cancer mortality rate	150.0	144.6	142.3	139.9	137.6	135.3	133.0
[5] Colorectal cancer mortality rate	13.6	13.1	12.5	12.3	12.2	12.0	11.8
[5] Cancer death rate ratio between blacks/whites	1.2	1.1	1.2	1.2	1.2	1.2	1.2

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 2024, reduce the proportion of Maryland middle and high school youth that currently smoke cigarettes by 93.2 percent and 85.2 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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
Middle school students who currently smoke cigarettes	1.1%	N/A	N/A	0.9%	0.7%	N/A	0.5%
[5] High school students who currently smoke cigarettes (all ages)	5.0%	N/A	N/A	3.6%	4.0%	N/A	3.5%
Percent of adults who currently smoke cigarettes	12.5%	12.7%	10.9%	10.1%	10.1%	9.7%	9.3%
Percent of Maryland middle school youth using tobacco products	9.0%	N/A	N/A	8.5%	8.0%	N/A	7.5%
Percent of Maryland high school youth using tobacco products	27.4%	N/A	N/A	15.6%	26.4%	N/A	25.9%
Percent of Maryland middle school youth using electronic smoking devices (ESDs)	5.9%	N/A	N/A	5.4%	4.9%	N/A	4.4%
Percent of Maryland high school youth using electronic smoking devices (ESDs)	23.0%	N/A	N/A	14.7%	22.0%	N/N	21.5%

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Est.	2022 Est.	2023 Est.	2024 Est.
Percent of adult African Americans who smoke cigarettes	13.7%	12.5%	11.9%	10.7%	11.1%	10.7%	10.3%
Percent of adult Hispanics who currently smoke cigarettes	6.8%	9.3%	5.1%	6.1%	4.5%	4.2%	3.9%

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.

Obj. 1.2 90 percent of all autopsy reports will be completed within 60 calendar days.

Performance Measures	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Total deaths investigated	15,716	15,346	16,779	18,600	17,422	18,000	18,500
[6] Total bodies examined	5,676	5,738	6,004	6,744	6,341	6,500	6,750
[7] Percent of cases examined within 24 hours	99%	99%	98%	95%	79%	80%	80%
Examinations performed	5,676	5,738	6,004	6,281	6,138	6,200	6,500
Percent of total bodies examined with full autopsy	N/A	N/A	N/A	67%	71%	71%	71%
Total toxicology tests performed	N/A	N/A	N/A	45,101	45,880	46,000	46,500
Number of Medical Examiners (full-time equivalent)	17	20	19	16	18	18	18
Ratio of autopsies to Medical Examiners	334	283	310	390	339	344	361
Percent of reports completed within 60 days	85%	83%	83%	78%	65%	70%	80%

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

Obj. 2.1 90 percent of all autopsy reports of homicide cases will be completed for the State's Attorney's office within 90 calendar days.

Performance Measures	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Total homicide cases	N/A	N/A	N/A	687	656	675	700
Percent of homicide reports completed within 90 days	N/A	N/A	N/A	83%	75%	75%	80%

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Percent of preparedness planning elements scored as "established" Maryland receives on the State ORR	N/A	100%	100%	N/A	100%	100%	100%
Percent of LHDs with 90 percent of preparedness planning elements rated as "established" on the ORR	N/A	71%	71%	N/A	75%	80%	85%

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 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	12.0%	8.0%	10.0%	15.0%

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Annual percentage increase of deployable volunteers also known as "Ready Responders"	15.6%	15.4%	30.8%	51.0%	56.0%	60.0%	75.0%

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
[8] Number of Maryland citizens aged 12 to 20	658,996	658,996	N/A	N/A	N/A	N/A	N/A
[8] Those aged 12 to 20 who used alcohol in the past month	126,000	123,891	N/A	N/A	N/A	N/A	N/A
[8] Percent of those aged 12 to 20 who used alcohol in the past month	19.1%	18.8%	N/A	N/A	N/A	N/A	N/A

Goal 2. To increase the community health worker (CHW) workforce certifications based on the completion of an accredited CHW certification training program through the implementation of the CHW certification and CHW certification training program accreditation processes.

Obj. 2.1 Increase the number of CHWs certified based on the completion of an accredited CHW certification training program by 20 percent per year.

Obj. 2.2 Increase the number of accredited CHW certification training programs by 10 percent per year.

Performance Measures	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Number of community health workers (CHWs) certifications based on the completion of an accredited CHW certification	N/A	N/A	N/A	60	187	224	269
Number of accredited community health worker (CHW) certification training programs	N/A	N/A	N/A	7	12	13	14

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 (Calendar Year)	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Est.	2023 Est.	2024 Est.
Percentage CDS Registrant Prescribers that are PDMP-registered	N/A	86%	85%	96%	96%	96%	96%
Average number of clinical user queries per fiscal year quarter	N/A	3,528,371	4,778,859	4,713,147	4,905,881	4,905,881	4,905,881

MDH - Public Health Services

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Total number of online CDS registration renewals	N/A	9,025	12,349	6,722	17,342	15,913	12,290
Total number of paper application renewals	N/A	680	1,914	1,200	1,200	500	100
Total number of CDS registration renewals	N/A	9,705	14,263	7,922	18,542	16,413	12,390
Percent online registration renewals/ total registration renewals	N/A	93%	87%	85%	94%	97%	99%
Average turn-around time for a CDS registration renewal	N/A	11	19	13	10	10	10

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Pharmacy inspections performed	236	332	596	591	630	600	477
Other CDS establishment inspections performed	339	109	871	147	905	800	697
Dispensing inspections performed	661	1,097	430	135	670	-	200
Total number of inspections performed	1,236	1,538	1,897	873	2,205	1,400	1,374
Projected number of inspections to be performed	1,145	1,175	1,225	1,400	2,205	1,400	1,400
Percent increase: actual inspections/ projected inspections	8%	31%	55%	-38%	0%	0%	-2%

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Number of genetic amplification techniques	36	38	40	42	44	46	48

MDH - Public Health Services

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	2018 Act.	2019 Act.	2020 Act.	2021 Act.	2022 Act.	2023 Est.	2024 Est.
Percent accuracy of environmental testing in proficiency testing	98%	98%	98%	99%	99%	99%	99%

NOTES

[1] Data unavailable at time of publication.

[2] 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.

[3] Data has been delayed due to CDC responses to COVID-19 and mpox.

[4] Data delayed due to cybersecurity incident at Maryland Department of Health.

[5] 2021 and 2022 data are estimates.

[6] Starting in 2021, this measure includes the total number of bodies transported to OCME for examination which includes full autopsies, partial autopsies, CT autopsies and OCME inspections at 1/3 - all per NAME reporting guidelines.

[7] Starting in 2021, this measure tracks "cases examined" within 24 hours instead of "cases released" because cases may not actually be released within 24 hours due to delays in funeral home transportation.

[8] The grant tied to these measures expired in September 2020.