

Department of Legislative Services
Maryland General Assembly
2025 Session

FISCAL AND POLICY NOTE
First Reader

Senate Bill 560
Finance

(Senators M. Washington and Lam)

Public Health - Maryland Commission on Health Equity - Membership and
Purposes

This bill adds new members to the Maryland Commission on Health Equity (MCHE), including the Commissioner of Correction (or the Commissioner's designee), the Secretary of the Environment (or the Secretary's designee), the Secretary of Veterans and Military Families (or the Secretary's designee), the Director of the Office of Health Care Quality (OHCQ) (or the Director's designee), and at least one member of the Moving Forward Nursing Home Quality Coalition. The bill also alters the purpose of the commission to include employing a health equity framework to examine (1) access to transportation and (2) proximity to health care facilities and providers. **The bill takes effect July 1, 2025.**

Fiscal Summary

State Effect: The commission can likely implement the bill's changes using existing budgeted resources. To the extent that the commission must actively conduct a study of access to transportation and proximity to health care under the bill, contractual services of approximately \$200,000 may be required. Revenues are not affected.

Local Effect: None.

Small Business Effect: None.

Analysis

Current Law: MCHE was established in 2021 to (1) employ a health equity framework in specified examinations; (2) provide advice to the Secretary of Health and others on

issues of racial, ethnic, cultural, or socioeconomic health disparities; (3) facilitate coordination of expertise and experience in developing a comprehensive health equity plan addressing the social determinants of health; and (4) set goals for health equity and prepare a plan for the State to achieve health equity in alignment with other statewide planning activities. Chapter 787 of 2024 added that MCHE is responsible for developing a statewide health equity plan and providing direct advice to the State's independent health regulatory commissions.

MCHE is staffed by the Maryland Department of Health (MDH) and comprises one member of the Senate; one member of the House of Delegates; the Secretaries (or their designees) of Aging, Agriculture, Budget and Management, Disabilities, Housing and Community Development, Human Services, and Planning; the State Superintendent of Schools; the Maryland Insurance Commissioner; a representative of a local health department; and specified additional representatives from MDH and the health care sector.

The Governor must designate the chair from among the members. A member of MCHE may not receive compensation but is entitled to reimbursement for expenses under the standard State travel regulations.

Among other things, MCHE is responsible for determining the impact of the following factors on the health of Maryland residents: access to safe and affordable housing; educational attainment; opportunities for employment; economic stability; environmental factors; public safety, including the impact of crime, citizen unrest, the criminal justice system, and governmental policies that affect individuals who are in prison or released from prison; and food insecurity.

MCHE must, in coordination with the State-designated health information exchange, establish an advisory committee to make recommendations on data collection, needs, quality, reporting, evaluation, and visualization for the commission to conduct its work.

State Expenditures: MDH advises that it would need to hire one part-time administrator to lead a subcommittee on access to transportation and health care facilities and one part-time program manager to meet the bill's requirement of the Director of OHCQ (or designee) serving on the commission at a cost of \$109,834 in general fund expenditures in fiscal 2026, increasing to \$142,817 in fiscal 2030.

The Department of Legislative Services (DLS) disagrees and notes that, as the commission is already operational and the bill mainly reinstates some members of the commission who were removed by Chapter 787, adding commissioners can likely be handled with existing budgeted resources. DLS further notes that the bill requires the commission to use a health equity lens when examining access to transportation and proximity to health care facilities. It does not require establishment of a subcommittee. Nevertheless, to the extent that the

commission elects to conduct a study of access to transportation and proximity to health care, contractual services of approximately \$200,000 may be required.

Additional Information

Recent Prior Introductions: Similar legislation has not been introduced within the last three years.

Designated Cross File: None.

Information Source(s): Maryland Department of the Environment; Maryland Department of Health; Department of Public Safety and Correctional Services; Maryland Department of Transportation; Department of Veterans and Military Families; Department of Legislative Services

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