



**2025 SESSION  
POSITION PAPER**

**BILL:** HB 1426 - Carroll County - Board of Health and Health Department  
**COMMITTEE:** House - Health and Government Operations Committee  
**POSITION:** Letter of Opposition  
**BILL ANALYSIS:** HB 1426 would establish the Carroll County Board of Commissioners as the Carroll County Board of Health, would require the Board of Health to establish standard operating procedures for the health department, would allow the Carroll County Board of Commissioners, acting as the Board of Health, to take certain actions including termination of the Health Officer and Deputy Health Officers without the approval of the Maryland Secretary of Health, etc.

**POSITION RATIONALE:** The Maryland Association of County Health Officers (MACHO) provides a Letter of Opposition for HB 1426. The bill makes sweeping changes to the public health system in Maryland and sets a dangerous precedent that could compromise the health and safety of Carroll County residents. HB 1426 would establish the Carroll County Board of Commissioners as the exclusive members of the Board of Health (BOH) for the county and provide the Board with unilateral authority to supervise, evaluate, and terminate the Health Officer and Deputy Health Officers at the Carroll County Health Department.

With the exception of the Baltimore City Health Commissioner, all Health Officers are state employees under the jurisdiction of the Maryland Department of Health (MDH) with the Secretary of Health as the appointing authority. Under Maryland's shared governance model, Health Officers report to both the Secretary and the jurisdiction's BOH as the governing authority. Under HB 1426, the Health Officer would remain a State employee but the State would lose its oversight authority for its own employee. Deputy Health Officers are State employees and have no local reporting designation but report to the Health Officer and, ultimately, MDH.

In addition to the serious concerns regarding the infringement of the State's authority over its employees, this proposed new structure would compromise the ability of a Health Officer to carry out their duties by creating a potential conflict between the demands of elected officials, state responsibilities and processes, and the Health Officer's professional and ethical responsibility to take actions in the best interest of public health.

The bill would authorize the BOH to create standard operating procedures for the local health department (LHD). LHDs are required to function in compliance with local, state, and federal laws and regulations.<sup>1</sup> Granting broad authority to the BOH to issue standard operating procedures for LHD responsibilities would likely conflict with these regulatory frameworks and place the Health Officer and other LHD staff in the impracticable position of either complying with the law and defying Board-issued procedures, risking termination by the Board, or breaking the law in order to comply with those procedures.

The bill also requires written evaluations of all LHD employees to be submitted to the BOH each year. For Carroll County, this would require the submission of more than 150 evaluations to the BOH. Apart from the administrative burdens and costs associated with staff time and materials to complete this task, it is unclear whether these evaluations would be separate from the State's performance evaluation system, adding a duplicative and unnecessary evaluation framework.<sup>2</sup> In addition, Carroll County Health Department staff are State employees. Sharing information regarding individual staff members outside of the State personnel system runs contrary to prevailing human resources norms. It also sets a precedent allowing local government to insert itself into the State personnel system and establish reporting requirements for a unit of state government outside of the existing legal framework.

The proposed legislation grants overly broad authority to the Carroll County Board of Commissioners, undermines the State's authority to oversee its employees, and creates unresolvable conflicts that make its implementation dangerous to the interests of public health.

For these reasons, the Maryland Association of County Health Officers submits this letter of opposition for HB 1426. For more information, please contact Ruth Maiorana, MACHO Executive Director at [rmaiora1@jhu.edu](mailto:rmaiora1@jhu.edu) or 410-937-1433. *This communication reflects the position of MACHO.*

Notes:

1. The following section of the proposed bill (3-203(C)(2) page 2, lines 22 to 27) includes a record retention provision that may conflict with State Government Article §10-616 which sets standards for the retention and disposal of public records. Complaints to the Carroll County Health Department are public records subject to this existing provision. These records are already subject to the Maryland Public Information Act (MPIA). The additional language about providing access to the "Carroll County Delegation to the General Assembly, business owners in Carroll County, and residents of Carroll County" is either redundant or intended to mean something more than what is already provided in the MPIA. Maryland courts warn against redundancy in legislation; a canon of statutory construction is for the court to give meaning to every word in a statute. *Doe v. Montgomery County Board of Education*, 406 Md. 697, 712 (2008) The proposed language is, at best, confusing or potentially changes terms of the MPIA for certain people who request public documents from the Carroll County Department of Health, eviscerating certain protections established by the MPIA.
2. If the intention is to use State employment system evaluations, the State Personnel and Pensions Article §7-503 establishes that performance evaluations are part of an employee's personnel record. The provision in the proposed bill is contrary to the spirit of the law that protects disclosure of personnel records to only those identified in the MPIA, General Provisions §4-311. The Board, even as proposed in this bill, would not be eligible to secure personnel records of all health department employees under the MPIA. Granting the Board access to all personnel records would directly conflict with the MPIA and place confidential information at risk without justification.