



Friday, March 6, 2026

Honorable Chair Pamela Beidle

Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Honorable Vice Chair Antonio Hayes

Senate Finance Committee
3 East Miller Senate Office Building
Annapolis, Maryland 21401

Chair Beidle, Vice Chair Hayes, and members of the Senate Finance Committee:

Thank you for the opportunity to provide informational testimony on Senate Bill 790, the *Public Health Reform Act of 2026*. I serve as the St. Mary's County Health Officer and as a Co-Chair for the Maryland Commission on Public Health.

The Maryland Commission on Public Health¹ was established to conduct a comprehensive assessment of the State's public health infrastructure and to develop recommendations to strengthen Maryland's public health system. Over the course of two years, the Commission convened experts from state and local government, academia, health systems, and community organizations. Through workgroup meetings, regional listening sessions, public comment, and a statewide system assessment conducted in partnership with academic institutions, the Commission evaluated Maryland's foundational public health capabilities and the structures that support them.

The Commission's work was grounded in the recognition that public health plays a critical role in the health, economic stability, and resilience of Maryland communities. The COVID-19 pandemic, the increasing prevalence of chronic disease, emerging infectious disease threats, and persistent health inequities all highlight the importance of a modern and adaptable public health system. The Commission's final report presents a roadmap for strengthening Maryland's public health capabilities and ensuring that state and local agencies have the tools necessary to address current and future public health challenges.

Central to the Commission's work was the understanding that Maryland's public health system is a partnership between the State and 24 local health departments. Local health departments are responsible for delivering a wide range of foundational services, including disease prevention, environmental health protection, clinical services for vulnerable populations, emergency preparedness, and community health improvement initiatives. Strengthening the effectiveness of these services requires coordination among governance structures and improving workforce capacity, funding mechanisms, and data systems.

¹Commission on Public Health. Maryland Department of Health. <https://health.maryland.gov/coph/Pages/default.aspx>

The Commission's final recommendations² reflect several key themes that emerged from its assessment: strengthening public health infrastructure including governance, human resources, and funding mechanisms; modernize and maximize communication, data, and information technology tools; leverage and formalize partnerships; bridge public health and health care service delivery; and pave the way for current and future public health leaders. These recommendations were designed to build on Maryland's existing strengths while addressing structural barriers that can limit the efficiency and responsiveness of the public health system.

Senate Bill 790 reflects elements of these broader recommendations and represents one approach to implementing aspects of the Commission's work. Several provisions of the legislation align with recommendations related to governance modernization, workforce development, and improving operational flexibility for public health agencies. For example, provisions establishing the Public Health Workforce Development Fund reflect the Commission's findings that building and sustaining a strong public health workforce is essential to maintaining core services and responding to emerging threats. Similarly, provisions that enable increased collaboration between the Maryland Department of Health and local health departments and engage local health officers in decision-making align with the Commission's recommendations to strengthen state-local collaboration and better meet the needs of Marylanders across the state. For a complete list of how the provisions align with the Commission's recommendations, see Table 1.

The Commission's final report contains a comprehensive set of recommendations intended to guide long-term improvements to Maryland's public health capabilities. As the General Assembly considers potential approaches to implementing the Commission's recommendations, continued collaboration among the legislature, the Maryland Department of Health, local health departments, academic partners, and community stakeholders will be essential. The Commission's work demonstrated that meaningful progress in public health depends on coordinated action across sectors and sustained investment in the people, infrastructure, and partnerships that support public health.

Thank you for the opportunity to provide informational context regarding the Commission's work and how Senate Bill 790 relates to its recommendations. I appreciate the Committee's attention to strengthening Maryland's public health system and am happy to serve as a resource as the General Assembly continues these discussions.

Sincerely,



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Co-Chair, Maryland Commission on Public Health

² Maryland Commission on Public Health (2025). *Building the Future of Maryland Public Health: 2025 Final Report*. https://health.maryland.gov/coph/Documents/2025-10-01_MDCoPH_Final_Report_v0.pdf.

Table 1: Alignment of Senate Bill 790 with the Commission on Public Health’s Final Recommendations

SB790 Provision	Alignment with CoPH Recommendations
<p>2-104.1(A) Before procuring a system for collecting and storing electronic health records, as defined in § 19–142 of this article, the Department shall consult with Local Health Departments to assess the necessary qualities of an electronic health records system.</p>	DIT-035 State Electronic Health Record System
	DIT-048 Public Health Record Digitalization
	GOC-052 Shared Governance Support
<p>2-104.1(B) If the Department procures a system for collecting and storing electronic health records, the Department shall notify each Health Officer for a county and offer the county health department the opportunity to join the procurement.</p>	DIT-035 State Electronic Health Record System
	DIT-048 Public Health Record Digitalization
	GOC-052 Shared Governance Support
	PCP-070 Procurement and Contracting Efficiencies
<p>2-1102(A) The Department shall organize the Maryland Medical Reserve Corps. (B) The purpose of the corps is to provide a statewide volunteer network integrated into community emergency systems to facilitate a coordinated approach to volunteer management. (C) The Corps shall include clinical and nonclinical personnel capable of assisting during crises that strain the health care system or public health system, including public health emergencies, disease outbreaks, and natural disasters.</p>	WKF-014 Maryland Responds Medical Reserve Corps Expansion
	WKF-053 Local Public Health Surge Volunteer Pipeline
<p>2-1103 The Department shall: (1) Maintain an efficient and modern electronic registration system to register and track volunteers for the Corps; (2) Designate a Public Health Emergency Surge Coordinator among its staff to coordinate and plan improvements to the Corps.</p>	WKF-014 Maryland Responds Medical Reserve Corps Expansion
	WKF-053 Local Public Health Surge Volunteer Pipeline
	DIT-036 Data Use Efficiency
	DIT-049 Efficiency of Business Functions
<p>3-306(c)(2)(II) If a position with a county health department is fully funded without the use of State funding, the Health Officer for the county may appoint an individual to the position without approval by the Secretary or the Secretary of Budget and Management.</p>	WKF-039 State Personnel System Task Force Recommendations
	WKF-040 Study/Commission on Public Health Human Resources Reform
<p>3-306(d)(2) If the Secretary does not respond to a request for written approval within 7 days after receiving the request, the Health Officer for the</p>	PCP-070 Procurement and Contracting Efficiencies

county may enter the contract or written agreement.	GOC-052 Shared Governance Support
	PCP-071 Medicaid Reimbursement Task Force
3-306(f) A Health Officer for a county may serve on the Board of a hospital in the State only if the Health Officer does not accept payment for the Health Officer's service on the Board.	GOC-029 Private Sector Health Systems
	PCP-068 Set of Shared Health Outcome Metrics
13-5103(a) The Commission consists of the following members: (3) The Secretary of Budget and Management, or the Secretary's designee	Supports implementation of all Funding (FND) recommendations
13-5103(a) The Commission consists of the following members: (4) The Secretary of Information Technology, or the Secretary's designee	Supports implementation of all Data and Information Technology (DIT) recommendations
13-5103(a) The Commission consists of the following members: (7) The Chief Executive Officer of the Chesapeake Regional Information System for our Patients (CRISP), or the Chief Executive Officer's designee	DIT-032 Centralized Data Repository
13-5105(B) The Commission shall provide oversight over implementation of the Commission's recommendations. (C) The Department shall provide an update regarding the implementation of the Commission's recommendations to the Commission each quarter.	Supports implementation of all recommendations
Subtitle 28. Public Health Workforce Development Fund	WKF-013 Statewide Public Health Workforce Training Strategy
	CCR-056 Primary Care Workforce Support
	CCR-063 Health-Related Funds
2-1505.3 The Department of Legislative Services, in consultation with the Legislative Policy Committee, shall develop a process to assess the health equity impacts of relevant legislation.	GOC-062 Equity Impact Assessment Policy for the General Assembly
21-203(a)(1) There is a Maryland Reserve Corps Program Advisory Board. (2) The Advisory Board consists of the following members: (v) Five members appointed by the Governor: (2) One of whom shall be a Health Officer, as defined in § 1-101 of the Health – General Article.	GOC-052 Shared Governance Support
	WKF-014 Maryland Responds Medical Reserve Corps Expansion
	WKF-053 Local Public Health Surge Volunteer Pipeline