

**M00B0104**  
**Health Professional Boards and Commissions**  
**Maryland Department of Health**

**Program Description**

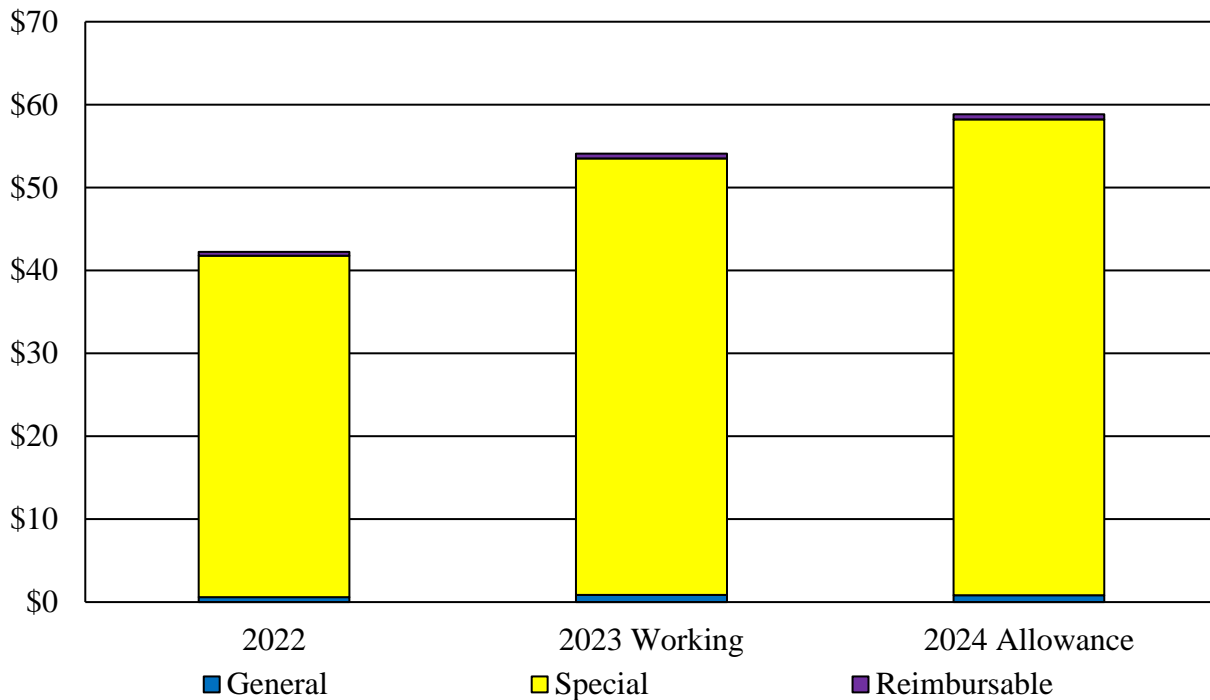
The 20 health professional boards and two commissions within the Maryland Department of Health (MDH) certify, license, resolve consumer complaints, and assist in establishing parameters for various providers through regulations. Nearly all the boards and commissions' funding is generated through licensing fees.

Each board shares the same goals of (1) protecting the public by ensuring that practicing health professionals are properly credentialed and licensed to provide high-quality services to Marylanders and (2) receiving, investigating, and resolving complaints in a timely manner.

***Operating Budget Summary***

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**Fiscal 2024 Budget Increases \$4.7 Million, or 8.7%, to \$58.8 Million**  
**(\$ in Millions)**



Note: The fiscal 2023 working appropriation includes deficiency appropriations including this agency's share of a deficiency appropriation budgeted in the Statewide Account within the Department of Budget and Management (DBM). The fiscal 2024 salary adjustments are budgeted in the Statewide Account within DBM.

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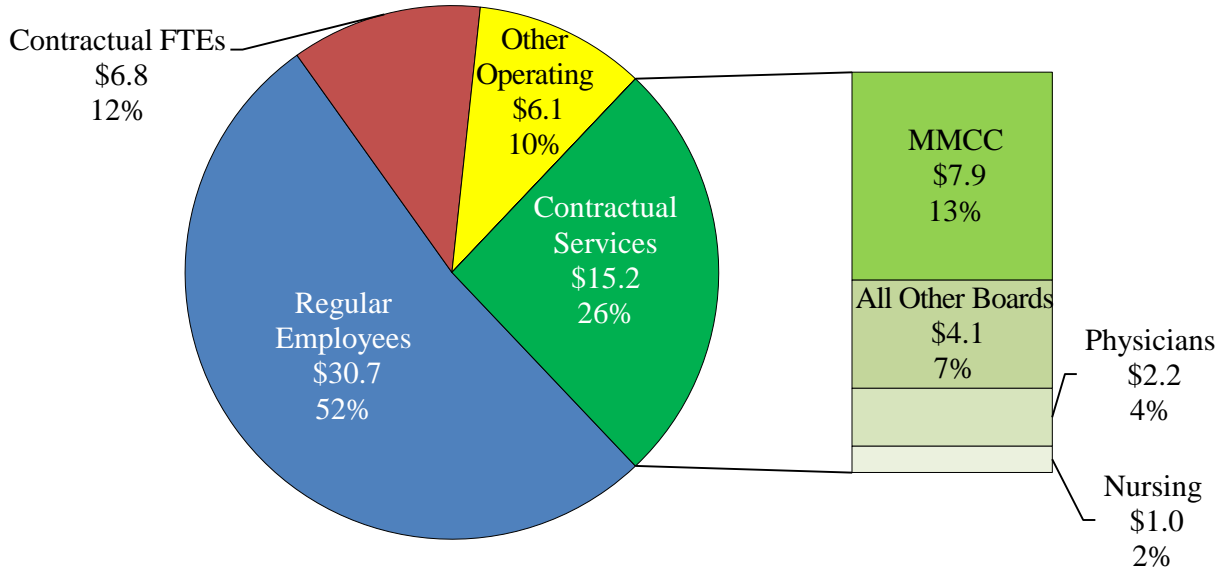
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- The Health Professional Boards and Commissions (HPBC) are primarily funded by special funds, the majority of which are utilized for administrative purposes for regular and contractual workers. There are three boards that are funded by general funds: the State Board of Environmental Health Specialists; the State Board of Examiners of Nursing Home Administrators; and the State Board of Residential Child Care.

### Fiscal 2024 Overview of Agency Spending

The fiscal 2024 allowance of HPBC totals \$58.8 million. As shown in **Exhibit 1**, the boards are largely administrative in nature, with 63.9% of the fiscal 2024 allowance dedicated to 287.5 regular positions and 101.56 contractual full-time equivalents (FTE). Expenditures for contracts accounts for an additional 26% of the budget with half (13% of the total fiscal 2024 allowance) occurring within the Natalie M. LaPrade Maryland Medical Cannabis Commission (MMCC). These contracts include \$2 million for the public health education campaign as mandated by Chapter 26 of 2022 as well as \$1 million for a patient applications enterprise system.

**Exhibit 1**  
**Overview of Agency Spending**  
**Fiscal 2024 Allowance**  
 (\$ in Millions)



FTE: full-time equivalent  
 MMCC: Maryland Medical Cannabis Commission

Note: The fiscal 2024 allowance does not reflect funding for salary enhancements that are budgeted within the Statewide Account in the Department of Budget and Management.

Source: Governor’s Fiscal 2024 Budget Books

The health occupation boards vary significantly in size and expenditures. For example, the largest board, the Maryland Board of Physicians, has a fiscal 2024 allowance of \$11.7 million, while the smallest, the Environmental Health Specialists, has a fiscal 2024 allowance of \$169,636.

## Proposed Budget Change

As shown in **Exhibit 2**, the fiscal 2024 allowance increases by \$4.7 million in fiscal 2024 as compared to the fiscal 2023 working appropriation after accounting for the agency’s share of the statewide deficiency for the 4.5% cost-of-living adjustment provided in November 2022. The fiscal 2024 growth is largely attributed to MMCC, which has experienced an increase of \$5.4 million. These increases occur in a variety of administrative expenses including contracts and grants for the work of MMCC, with \$2 million to fund the public health education campaign as required by Chapter 26, as well as grants related to medical cannabis research, and a variety of other contracts. It is expected that MMCC will continue to grow in following fiscal years as it expands to regulate the recreational cannabis market across the State.

**Exhibit 2**  
**Proposed Budget**  
**Maryland Department of Health – Health Professional Boards and Commissions**  
**(\$ in Thousands)**

| <b>How Much It Grows:</b>         | <b>General<br/>Fund</b> | <b>Special<br/>Fund</b> | <b>Reimb.<br/>Fund</b> | <b>Total</b>  |
|-----------------------------------|-------------------------|-------------------------|------------------------|---------------|
| Fiscal 2022 Actual                | \$606                   | \$41,168                | \$458                  | \$42,232      |
| Fiscal 2023 Working Appropriation | 852                     | 52,663                  | 577                    | 54,092        |
| Fiscal 2024 Allowance             | <u>831</u>              | <u>57,374</u>           | <u>620</u>             | <u>58,825</u> |
| Fiscal 2023-2024 Amount Change    | -\$21                   | \$4,710                 | \$43                   | \$4,732       |
| Fiscal 2023-2024 Percent Change   | -2.4%                   | 8.9%                    | 7.4%                   | 8.7%          |

| <b>Where It Goes:</b>   | <b>Change</b> |
|---|---------------|
| <b>Personnel Expenses</b>   |               |
| Employee and retiree health insurance.....  | \$771         |
| Annualization of the November 2022 4.5% COLA .....  | 333           |
| Salary costs for 2 new regular positions.....   | 91            |
| Employee retirement system .....  | 50            |
| Other fringe benefit adjustments .....  | 24            |
| Overtime earnings .....   | -33           |
| Regular earnings.....   | -107          |
| Shared services costs for departmental coordination .....   | -348          |
| Turnover adjustments as turnover rate increases from 6.5% in fiscal 2023 to 8.5%<br>in fiscal 2024..... | -458          |

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| <b>Where It Goes:</b>   | <b><u>Change</u></b> |
|---|----------------------|
| <b>Maryland Board of Physicians</b>   |                      |
| Decrease in contractual services costs, including practitioner rehabilitation services, supervisors for practitioner probation, and peer review services..... | -795                 |
| Lower individual work computer costs utilizing a three-year average of actuals...   | -19                  |
| Lower travel costs due to virtual meetings.....   | -20                  |
| <b>Maryland Board of Nursing</b>  |                      |
| Lower security costs due to virtual meetings .....  | -28                  |
| Lower postage and telephone costs to prioritize email communications .....  | -46                  |
| Decrease in costs relating to software renewal contracts to operate legacy licensure systems .....  | -129                 |
| Decrease in costs paid for central support, including human resources, finance, procurement .....   | -283                 |
| <b>Maryland Medical Cannabis Commission</b>   |                      |
| Public health education campaign costs as required by Chapter 26 of 2022 .....  | 2,000                |
| Various contracts for best practices implementation, public relations consulting, legal resources center, among others .....                                  | 1,100                |
| Medical Cannabis Research Grants.....   | 1,025                |
| Patients’ applications enterprise system.....   | 1,000                |
| Share of attorney general personnel costs .....   | 732                  |
| Replacement and additional vehicle costs for field operations .....   | 289                  |
| Computers for new MMCC staff members .....  | 35                   |
| Contractual licensee financial auditing services.....   | -150                 |
| Lower costs for the Seed-to-Sale Tracking System .....  | -1,190               |
| <b>Other Boards</b>   |                      |
| Share of Attorney General personnel costs.....  | 571                  |
| Net contractual employee costs for 7 new FTE positions and the annualization of November 2022 4.5% COLA .....   | 291                  |
| Software renewal contracts to operate legacy licensure systems, every day software costs, among others .....  | 205                  |
| Costs for two additional Board of Pharmacy vehicles for field operations .....  | 65                   |
| Increase in travel costs for seminars, staff retreats, employee trainings.....  | 49                   |
| Subscription costs .....  | 26                   |
| Other adjustments .....   | -319                 |
| <b>Total</b>  | <b>\$4,732</b>       |

COLA: cost of living adjustment

FTE: full-time equivalent

MMCC: Maryland Medical Cannabis Commission

Note: Numbers may not sum due to rounding. The fiscal 2023 working appropriation includes deficiency appropriations including this agency’s share of a deficiency appropriation budgeted in the Statewide Account within the Department of Budget and Management (DBM). The fiscal 2024 salary enhancements are budgeted in the Statewide Account within DBM.

***Personnel Data***

|                        | <b><u>FY 22</u></b><br><b><u>Actual</u></b> | <b><u>FY 23</u></b><br><b><u>Working</u></b> | <b><u>FY 24</u></b><br><b><u>Allowance</u></b> | <b><u>FY 23-24</u></b><br><b><u>Change</u></b> |
|------------------------|---|--|--|--|
| Regular Positions      | 282.50                                      | 285.50                                       | 287.50   | 2.00   |
| Contractual FTEs       | <u>63.56</u>                                | <u>94.90</u>                                 | <u>101.56</u>                                  | <u>6.66</u>                                    |
| <b>Total Personnel</b> | <b>346.06</b>                               | <b>380.40</b>                                | <b>389.06</b>                                  | <b>8.66</b>                                    |

***Vacancy Data: Regular***

|   |       |        |
|---|-------|--------|
| Turnover and Necessary Vacancies, Excluding New Positions | 24.15 | 8.46%  |
| Positions and Percentage Vacant as of 12/31/22            | 45.00 | 15.76% |
| Vacancies Above Turnover                                  | 20.85 |        |

- The fiscal 2024 allowance includes a net increase of 2 positions for HPBC, which includes 3 positions transferred out to other areas of MDH and 5 positions transferred in. Of the positions transferred in, 2 positions are for the Board of Physical Therapy Examiners, 1 position for the Board of Nursing, and 2 positions for various other boards.
- The fiscal 2024 allowance includes a net increase of 6.66 contractual FTEs. The net increase is split between MMCC and the Board of Nursing.
- At the time of the writing of this report, HPBC had 20.85 more vacant positions than are needed to meet the fiscal 2024 turnover. **MDH should comment on steps taken to reduce vacancies at the boards and how these vacancies are impacting the operations of the boards.**

## ***Key Observations***

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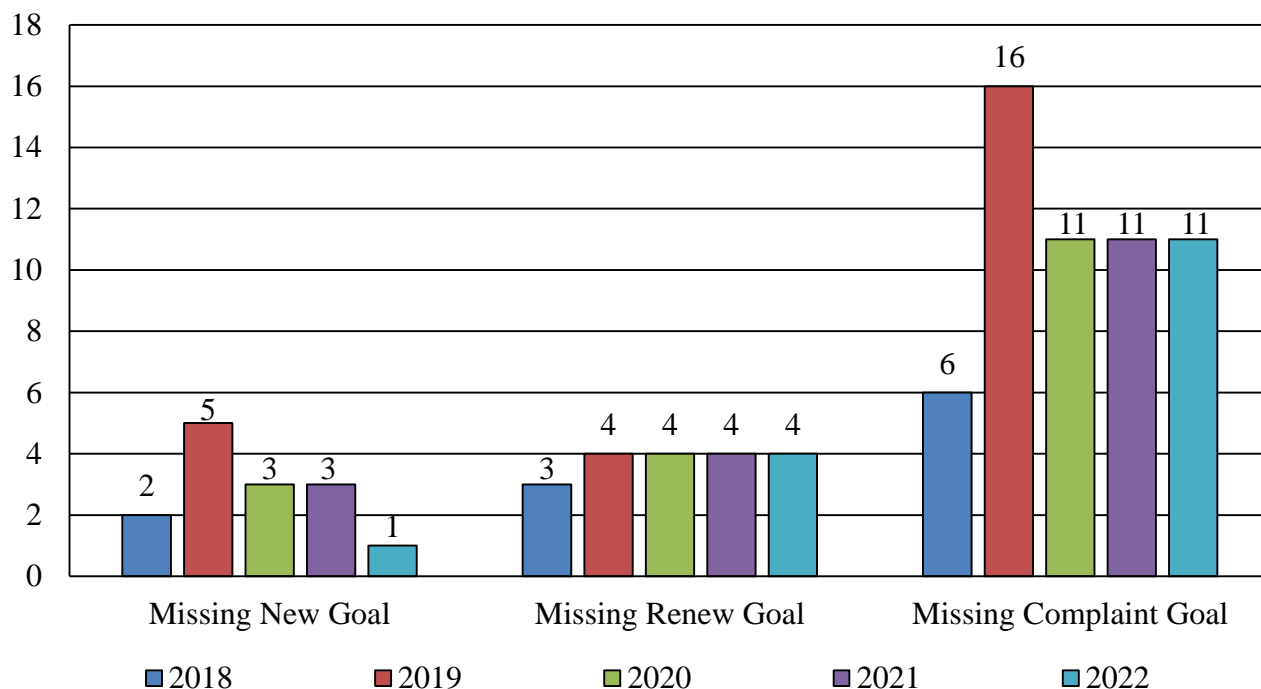
### **1. Boards Unable to Meet Managing for Results Investigation Goals**

HPBC aims to ensure the delivery of quality health care and protection of the public through the licensing of providers in the State. The Department of Legislative Services (DLS) analyzes Managing for Results (MFR) data that tracks licensing, the renewal processes, and the timeliness of investigations into providers to determine efficiency and effectiveness of the boards. Due to the differing size of each board, measurements may vary slightly:

- all boards are expected to issue 95% of initial licenses within 10 days of the receipt of the last qualifying document;
- annually issue renewal licenses to 90% of qualified Board of Nursing applicants and 95% of all other boards within five days of receipt of the last qualifying document;
- annually improve the percent of complaint investigations completed by the Board of Physicians and the Board of Nursing to 90% within 540 and 270 days, respectively, and by all other boards and commissions to 100% within 180 days; and
- the Board of Physicians will resolve 95% of preliminary investigations within 150 days.

**Exhibit 3** shows the number of boards that have missed these goals in the last five years. Largely, the boards were able to meet their initial and renewal licensing goals with only one board missing their fiscal 2022 initial licensing goal and four boards missing their renewal licensing objective. The missed investigation goal remains high with 11 boards missing the goal in fiscal 2022, which is concerning as the boards should be investigating practitioners with whom consumers have filed complaints. Without timely investigations, it is possible that there are practitioners who may be practicing improperly or providing subpar care.

**Exhibit 3  
Managing for Results Goals  
Fiscal 2018-2022**



Note: Maryland Medical Cannabis Commission excluded from count due to differing methods of measurement.

Source: Department of Budget and Management

As shown in **Exhibit 4**, fiscal 2019 had the highest number of boards that missed the investigation goal, with 16 boards failing to investigate complaints against providers within their designated time frame. In fiscal 2022, only 10 of the 21 assessed boards, or 47%, were able to meet their investigation goals. These boards also saw decreases from the prior fiscal year, with the Board of Dental Examiners, the Board of Pharmacy, the Board of Physical Therapy Examiners, the Board of Professional Counselors and Therapists, and the Board of Social Work Examiners at or under 50% of their investigation timeliness goal. Of those boards, three have not met this goal for the last five fiscal years, with the remaining two having missed the goals for the last two and four fiscal years. In addition, while the Board of Audiologists has missed the timeliness goals by a smaller degree than these other boards, it has also missed the goals in each of the last five years. **MDH should comment on efforts to assist the Board of Dental Examiners, the Board of Pharmacy, the Board of Physical Therapy Examiners, the Board of Professional Counselors and Therapists, and the Board of Social Work Examiners, as well as any other board who has not met its investigation goals for consecutive years, in meeting its MFR goals and steps taken to ensure timely investigations are taking place.**

**Exhibit 4**  
**Missed Investigation Goals**  
**Fiscal 2018-2022**

|                              | <u>2018</u> | <u>2019</u> | <u>2020</u> | <u>2021</u> | <u>2022</u> |
|------------------------------|-------------|-------------|-------------|-------------|-------------|
| Acupuncture                  | 100%        | <b>50%</b>  | 100%        | 100%        | <b>83%</b>  |
| Audiologists                 | <b>88%</b>  | <b>85%</b>  | <b>68%</b>  | <b>89%</b>  | <b>95%</b>  |
| Chiropractic                 | 100%        | <b>77%</b>  | <b>60%</b>  | <b>97%</b>  | <b>84%</b>  |
| Dental                       | <b>80%</b>  | <b>63%</b>  | <b>26%</b>  | <b>37%</b>  | <b>34%</b>  |
| Dietetic                     | 100%        | <b>81%</b>  | 100%        | 100%        | 100%        |
| Environmental Health         | 100%        | <b>33%</b>  | <b>0%</b>   | 100%        | 100%        |
| Kidney Disease               | 100%        | 100%        | <b>79%</b>  | 100%        | 100%        |
| Massage Therapy              | 100%        | <b>95%</b>  | <b>73%</b>  | <b>94%</b>  | <b>89%</b>  |
| Morticians                   | <b>82%</b>  | <b>57%</b>  | 100%        | 100%        | 100%        |
| Nursing: Registered Nurse    | <b>49%</b>  | <b>4%</b>   | <b>32%</b>  | <b>68%</b>  | 100%        |
| Nursing Home Administrators  | 100%        | 100%        | 100%        | <b>16%</b>  | 100%        |
| Occupational Therapy         | 100%        | 100%        | <b>87%</b>  | <b>76%</b>  | <b>96%</b>  |
| Optometry                    | 100%        | <b>65%</b>  | <b>87%</b>  | 100%        | <b>87%</b>  |
| Pharmacy                     | 100%        | <b>80%</b>  | <b>88%</b>  | <b>88%</b>  | <b>41%</b>  |
| Physical Therapy             | 100%        | 100%        | 100%        | <b>50%</b>  | <b>50%</b>  |
| Physicians and Allied Health | 100%        | <b>93%</b>  | 100%        | 100%        | 100%        |
| Podiatric                    | 100%        | <b>87%</b>  | 100%        | 100%        | 100%        |
| Counselors/Therapists        | <b>49%</b>  | <b>53%</b>  | <b>50%</b>  | <b>50%</b>  | <b>52%</b>  |
| Psychologists                | 100%        | 100%        | 100%        | 100%        | 100%        |
| Residential Child Care       | 100%        | <b>0%</b>   | 100%        | 100%        | 100%        |
| Social Work                  | <b>39%</b>  | <b>75%</b>  | <b>65%</b>  | <b>92%</b>  | <b>47%</b>  |

Note: Bolded percentages indicate missed goals experienced by each board per year.

Source: Department of Budget and Management

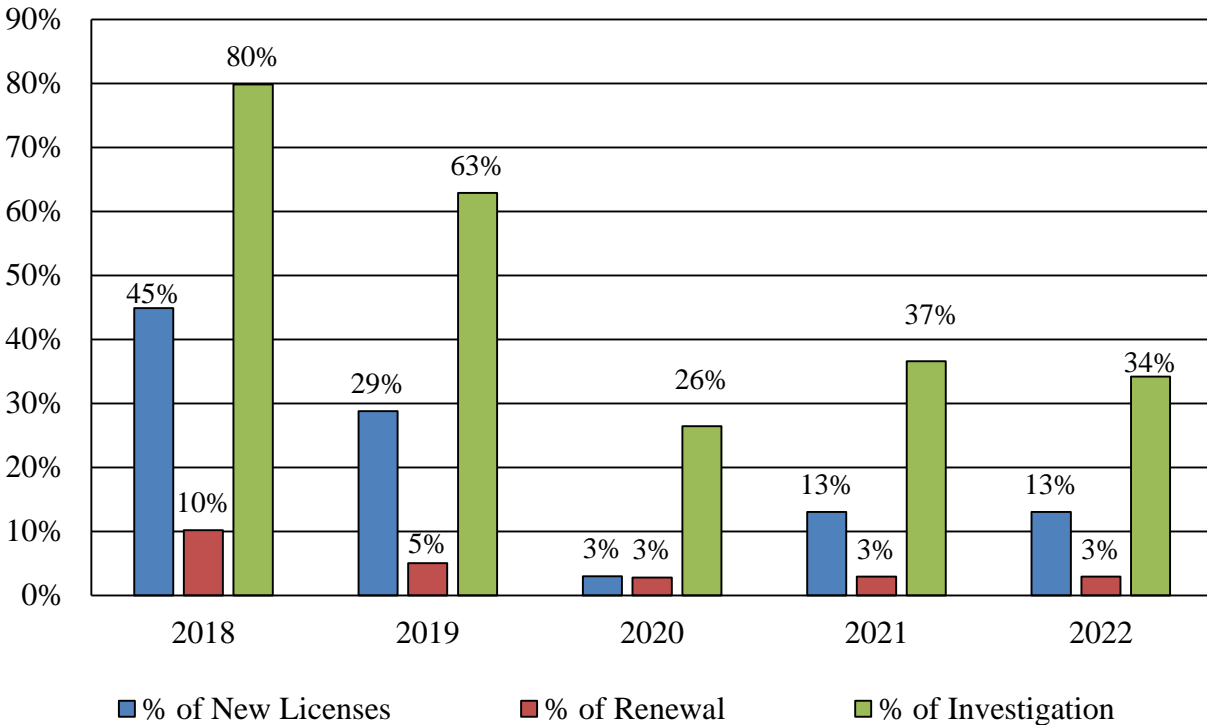
## 2. Board of Dental Examiners Met None of the Managing for Results Goals

As stated in Key Observation 1, the goal of the boards is to issue 95% of new and renewal licenses within 10 days and 5 days, respectively, of receipt of the last qualifying document and 100% of complaint investigations completed with within 180 days. As shown in **Exhibit 5**, the Board of Dental Examiners has fallen short of these goals for the last five fiscal years with performance consistently under 50% on each of the measures in fiscal 2020 through 2022 and for



two of the three measures in fiscal 2018 and 2019. Fiscal 2018 represented the agency’s highest performance in this period when the board processed 45% of new licenses, 10% of renewal licenses, and 80% of complaints within the timeliness goals.

**Exhibit 5**  
**Board of Dental Examiners Processing Timeliness**  
**Fiscal 2018-2022**



Source: Department of Budget and Management

Committee narrative in the 2022 *Joint Chairmen’s Report* (JCR), requested that the Board of Dental Examiners submit a report detailing the reasons for the board’s difficulty in meeting set goals and how the board planned to remedy its low percentage of timely completion of licensing, renewal, and investigation efforts, along with a timeline for improvement. The report was due November 1, 2022, and, as of the writing of this analysis, the report has not been submitted. In conversations with the board, they indicated that they believed a former employee had mistakenly provided wrong data to the Department of Budget and Management and were working on reconciling the figures. However, DLS notes that the MFR submission for fiscal 2024 that includes the fiscal 2022 data continues to show low performance despite the conversations indicating the prior data may not have been accurate.

**Given the continuing failure to meet established goals for licensing, renewals, and investigations and the failure to submit a timely report, DLS recommends adding language restricting funds until MDH submits a report outlining the reasons the Board of Dental Examiners is unable to meet its timeliness goals, plans to remedy its low percentage of completion across its objectives, a timeline for improvement, and, if applicable, accurate data for these measures for the last five fiscal years.**

### **3. Transfer of MMCC to the Alcohol and Tobacco Commission**

Chapter 26 expressed the intent of the General Assembly to transfer MMCC to the Alcohol and Tobacco Commission (ATC) if Chapter 45 of 2022, a constitutional amendment legalizing adult use and possession of recreational cannabis, was approved by the voters in the 2022 general election. Chapter 26 also required that MMCC and ATC make a recommendation to the General Assembly about how to transfer the personnel to ensure costs of the transfer are minimized; employees maintain their rate of pay, working conditions, benefits, rights, and/or status; and ensure personnel can retain merit and retirement statuses from MMCC at the time of the transfer.

ATC and MMCC submitted the required recommendations in a report on October 11, 2022, which included:

- MMCC personnel will either transfer to a newly established Cannabis Regulatory and Enforcement Division or merge into existing shared administrative space under the Office of the Executive Director of ATC on or after July 1, 2023;
- all MMCC personnel will transfer without loss of pay, working conditions, benefits, rights, or status, and will retain any merit or retirement status they may have on the date of transfer;
- effective July 1, 2023, ATC and MMCC will merge common administrative and operational functions, including communications, human resources, budget and finance, procurement, legal and legislative, and research and education;
- ATC and MMCC will retain existing office space and study the need for additional space and secure storage; and
- paper materials and other documents reflecting the renaming of MMCC to be the Office of the Executive Director of ATC may not be used until all paper materials and other documents already in print and reflecting the name or logo of MMCC have been used.

DLS notes that the fiscal 2024 budget does not reflect a transfer of funding from MMCC to ATC in anticipation of the consolidation of the commission. **MMCC should comment on the process for the transfer of their budget to ATC and an estimated date for the funding consolidation.**

## Operating Budget Recommended Actions

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1. Add the following language to the special fund appropriation:

, provided that \$150,000 for the Board of Dental Examiners, made for the purposes of the Health Professional Boards and Commissions, may not be expended until the Maryland Department of Health submits a report addressing steps being taken to ensure the Board of Dental Examiners can meet its initial licensing, renewal, and investigation timeliness goals, including information on the specific actions being taken to improve performance and, if applicable, revised data covering the fiscal 2018 through fiscal 2022 performance for each measure if the prior submitted data is determined to be inaccurate. The report shall be submitted by July 1, 2023, and the budget committees shall have 45 days from the date of the receipt of the report to review and comment. Funds restricted pending the receipt of the report may not be transferred by budget amendment or otherwise to any other purpose and shall be canceled if the report is not submitted to the budget committees.

**Explanation:** The Board of Dental Examiners has not been able to meet their established timeliness goals for initial licensing and renewals, and investigations over the last five fiscal years. This language restricts funding budgeted for the Board of Dental Examiners until the Maryland Department of Health (MDH) submits a report to the budget committees on the steps being taken to assist the board in reaching their Managing for Results (MFR) goals and corrects any data that may be inaccurate.

| <b>Information Request</b>                        | <b>Author</b> | <b>Due Date</b> |
|---|---------------|-----------------|
| Report on the Board of Dental Examiners MFR Goals | MDH           | July 1, 2023    |

**Appendix 1**  
**2022 Joint Chairmen’s Report Responses from Agency**

The 2022 JCR requested that HPBC prepare eight reports – six of these were submitted. Electronic copies of the full JCR responses can be found on the DLS Library website.

- **Report on Efforts of the Board of Professional Counselors and Therapists to Address Repeat Audit Findings:** The Board of Professional Counselors and Therapists outlined steps taken to resolve repeat audit findings relating to properly monitoring complaints and maintaining tracking logs to ensure all logs reflect critical information. The board indicated that it implemented an online Case Management System on January 6, 2021, that tracks complaints from intake through final disposition. All incoming complaints are triaged upon receipt and forwarded for review at the next meeting of the board, helping to significantly reduce their backlog of complaints. The funds restricted until the report was submitted were released on January 9, 2023.
- **Report on Efforts of the Board of Pharmacists to Address Repeat Audit Findings:** The Board of Pharmacists were found to not have adequate controls over collections and deposits. The board performed documented verifications that credit card collections were deposited as well as now periodically reconciling licensing activity with related collections. These measures involve a board employee generating a monthly report to assist in tracking monthly revenue and licenses issued to specific revenue. The funds restricted until the report was submitted were released on October 19, 2022.
- **Report on Meeting Performance Goals by the Board of Dental Examiners:** As of February 1, 2023, this report has not submitted by the Board of Dental Examiners. The board’s performance in these measures is discussed in Key Observation 2 of this analysis.
- **Report on Addressing Repeat Audit Findings:** In response to committee narrative in the 2022 JCR, 17 of the boards submitted a joint report outlining the steps each board has taken to remedy a repeat audit finding regarding having adequate controls over collections and deposits and ensuring all checks and money orders have been deposited and recorded in the State’s accounting records. All boards have a designated employee to handle mail and initially handle all checks and/or money orders before logging all checks and money orders and providing the log to the employee who enters the information into the Cashlog system, often the executive director.
- **Update on MDH Licensing and Regulatory Management System Project:** The fiscal 2023 allowance showed an \$8 million increase in costs for implementing MDH’s OneStop online solution for licensing. This discrepancy between the \$2 million in fiscal 2022 to the nearly \$10 million in fiscal 2023 was due to a feasibility study that prioritized the needs of the Board of Nursing. It did not provide a cost analysis comparison of other states that have adopted a similar information technology solution as required.

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- ***Report on Efforts of the Board of Nursing to Address Repeat Audit Findings:*** The Board of Nursing outlined steps being taken to address repeat audit findings, including having established controls and procedures to ensure only authorized staff have access to information that is pertinent to their duties. This system also ensures users cannot unilaterally issue or renew licenses aside from certain managerial and nonmanagerial staff. The Board of Nursing reports that implementing strong password controls is contingent upon the Department of Information Technology assisting the board in connecting to a secure system, which they anticipate will be completed by May 2023. The funds that were restricted until this report was submitted were released on January 20, 2023.
- ***Report on Timely Processing of Investigations:*** The Board of Nursing outlined their process by which investigations are handled, including the initial complaint intake, and assigning the complaint to a course track (Refer to Safe Practice Program, Take no Action, Invitation to Pre-Charge Committee, Voluntary Surrender of license or certificate, etc.). The report also outlined the staff (4 individuals) and the number of vacancies (7 positions) as well as the average time it takes to complete one complaint (26-71 hours).
- ***Report on Cybersecurity Impacts to Health Occupations Boards:*** This report was due on August 1, 2022, and as of February 1, 2023, had not been submitted by the Health Occupations Boards.

**Appendix 2**  
**MDH Licensing and Regulatory Management System Project**  
**Major Information Technology Project**  
**Maryland Health Professional Boards and Commissions**

Funding allocated in M00A01.08

|                                       |                   |                |                |                |  |               |                  |                 |
|---------------------------------------|-------------------|----------------|----------------|----------------|--|---------------|------------------|-----------------|
| <b>New/Ongoing:</b> Ongoing           |                   |                |                |                |  |               |                  |                 |
| <b>Start Date:</b> March 2019         |                   |                |                |                | <b>Est. Completion Date:</b> June 2025 |               |                  |                 |
| <b>Implementation Strategy:</b> Agile |                   |                |                |                |  |               |                  |                 |
| <b>(\$ in Millions)</b>               | <b>Prior Year</b> | <b>2023</b>    | <b>2024</b>    | <b>2025</b>    | <b>2026</b>                            | <b>2027</b>   | <b>Remainder</b> | <b>Total</b>    |
| <b>GF</b>                             | \$0.000           | \$2.200        | \$4.100        | \$3.600        | \$0.000                                | \$0.000       | \$0.000          | <b>\$9.800</b>  |
| <b>SF</b>                             | 0.500             | 0.00           | 0.000          | 0.000          | 0.000                                  | 0.000         | 0.000            | <b>0.500</b>    |
| <b>FF</b>                             | 0.000             | 0.0000         | 0.000          | 0.000          | 0.000                                  | 0.0000        | 0.000            | <b>0.000</b>    |
| <b>Total</b>                          | <b>\$0.500</b>    | <b>\$2.200</b> | <b>\$4.100</b> | <b>\$3.600</b> | <b>\$0.00</b>                          | <b>\$0.00</b> | <b>\$0.000</b>   | <b>\$10.300</b> |

- **Project Summary:** The project aims to develop an enterprise licensing and regulatory management solution, called the OneStop Portal, to manage all aspects of licensing. The goal of the program is to advance and protect the public’s health and welfare through proper credentialing, permitting, licensing, examination, inspection, and discipline of health providers, distributors, and facilities. Stakeholders include the boards, licensing applicants, licensees, public facilities, and the public.
- **Need:** The Health Occupations Boards utilize different licensing systems to provide services, with many of these being outdated or insufficient for the level of service required. This project ensures all boards are using the same updated system to provide services to their customers.
- **Observations and Milestones:** Design, development, and implementation are expected to be completed by the end of fiscal 2025.
- **Concerns:** Several boards have recently established new licensing and regulatory management systems individually or have expressed the desire to keep their current online licensing solutions – it is unclear how MDH plans to proceed with this project without unanimous support by all boards.

**Appendix 3**  
**Object/Fund Difference Report**  
**Maryland Department of Health – Health Professional Boards and Commissions**

| <u>Object/Fund</u>                      | <u>FY 22</u><br><u>Actual</u> | <u>FY 23</u><br><u>Working</u><br><u>Appropriation</u> | <u>FY 24</u><br><u>Allowance</u> | <u>FY 23 - FY 24</u><br><u>Amount Change</u> | <u>Percent</u><br><u>Change</u> |
|---|-------------------------------|--|----------------------------------|--|---------------------------------|
| <b>Positions</b>                        |                               |  |                                  |  |                                 |
| 01 Regular                              | 282.50                        | 285.50   | 287.50                           | 2.00   | 0.7%                            |
| 02 Contractual                          | 63.56                         | 94.90  | 101.56                           | 6.66   | 7.0%                            |
| <b>Total Positions</b>                  | <b>346.06</b>                 | <b>380.40</b>  | <b>389.06</b>                    | <b>8.66</b>                                  | <b>2.3%</b>                     |
| <b>Objects</b>                          |                               |  |                                  |  |                                 |
| 01 Salaries and Wages                   | \$ 26,189,346                 | \$ 29,781,919  | \$ 30,769,211                    | \$ 987,292                                   | 3.3%                            |
| 02 Technical and Special Fees           | 4,605,717                     | 6,373,700  | 6,796,320                        | 422,620                                      | 6.6%                            |
| 03 Communication                        | 424,402                       | 603,831  | 541,506                          | -62,325                                      | -10.3%                          |
| 04 Travel                               | 134,923                       | 728,437  | 783,463                          | 55,026                                       | 7.6%                            |
| 07 Motor Vehicles                       | 26,625                        | 160,784  | 515,753                          | 354,969                                      | 220.8%                          |
| 08 Contractual Services                 | 8,503,919                     | 12,381,879   | 15,166,340                       | 2,784,461                                    | 22.5%                           |
| 09 Supplies and Materials               | 314,349                       | 353,296  | 307,772                          | -45,524                                      | -12.9%                          |
| 10 Equipment – Replacement              | 61,513                        | 172,482  | 141,226                          | -31,256                                      | -18.1%                          |
| 11 Equipment – Additional               | 73,722                        | 366,779  | 399,211                          | 32,432                                       | 8.8%                            |
| 12 Grants, Subsidies, and Contributions | 0                             | 225,000  | 1,250,000                        | 1,025,000                                    | 455.6%                          |
| 13 Fixed Charges                        | 1,897,418                     | 2,132,421  | 2,153,962                        | 21,541                                       | 1.0%                            |
| <b>Total Objects</b>                    | <b>\$ 42,231,934</b>          | <b>\$ 53,280,528</b>                                   | <b>\$ 58,824,764</b>             | <b>\$ 5,544,236</b>                          | <b>10.4%</b>                    |
| <b>Funds</b>                            |                               |  |                                  |  |                                 |
| 01 General Fund                         | \$ 605,581                    | \$ 838,246   | \$ 831,309                       | -\$ 6,937                                    | -0.8%                           |
| 03 Special Fund                         | 41,168,487                    | 51,865,369   | 57,373,727                       | 5,508,358                                    | 10.6%                           |
| 09 Reimbursable Fund                    | 457,866                       | 576,913  | 619,728                          | 42,815                                       | 7.4%                            |
| <b>Total Funds</b>                      | <b>\$ 42,231,934</b>          | <b>\$ 53,280,528</b>                                   | <b>\$ 58,824,764</b>             | <b>\$ 5,544,236</b>                          | <b>10.4%</b>                    |

Note: The fiscal 2023 appropriation does not include deficiencies. The fiscal 2024 allowance does not reflect salary adjustments budgeted within the Department of Budget and Management.