

Department of Legislative Services  
Maryland General Assembly  
2022 Session

FISCAL AND POLICY NOTE  
Third Reader - Revised

House Bill 373

(Delegate Reznik, *et al.*)

Health and Government Operations

Finance

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State Postmortem Examiners Commission - Minimum Staffing Requirements

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This bill requires the Maryland Department of Health (MDH) to ensure that the number of staff employed by the State Postmortem Examiners Commission does not fall to a level that constitutes a Phase II violation under the National Association of Medical Examiners (NAME).

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Fiscal Summary

**State Effect:** General fund expenditures increase by an indeterminate amount beginning in FY 2023 for salary increases; expenditures increase further, by a potentially significant amount, beginning in FY 2024 for additional staff, as discussed below.

**Local Effect:** None.

**Small Business Effect:** None.

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Analysis

**Current Law:** The commission may employ a staff in accordance with the State budget for the operation of the commission and to maintain accreditation. The staff must include:

- one chief medical examiner;
- two deputy chief medical examiners;
- assistant medical examiners;
- one chief State toxicologist, one deputy chief State toxicologist, lead toxicologists, and assistant toxicologists;

- one serologist;
- four resident medical doctors who are training in forensic pathology;
- one chief forensic investigator, two deputy chief forensic investigators, lead forensic investigators, and assistant forensic investigators; and
- one autopsy services supervisor, one deputy supervisor, lead autopsy technicians, and assistant autopsy technicians.

The commission may also employ any physician on a contract basis for part-time services.

NAME is the national professional organization of physician medical examiners, medicolegal death investigators, and death investigation system administrators who perform the official duties of the medicolegal investigation of deaths of public interest in the United States. NAME also maintains a peer review system of accreditation for offices and systems (rather than individuals). The standards set by NAME emphasize policies and procedures over work product and represent minimums for an adequate medicolegal system not guidelines. A copy of the current NAME inspection and accreditation checklist effective from 2019 to 2024 can be located [here](#).

**State Fiscal Effect:** The Office of the Chief Medical Examiner (OCME) first received accreditation from NAME in January 1987. As of January 25, 2022, OCME is fully accredited by NAME. A long-standing challenge for OCME has been maintaining adequate staffing to perform increasing numbers of autopsies and meet NAME's standard that no medical examiner (ME) should be required to perform more than 325 autopsies per year. This standard is measured as the caseload ratio of autopsies to full-time equivalent (FTE) MEs. In fiscal 2021, OCME operated at a ratio of 390 autopsies per FTE ME (65 autopsies per FTE ME above the NAME standard).

In recent years, the number of autopsies performed by OCME increased by nearly 5% annually. If case levels continue to increase at this rate, OCME will need three additional FTE MEs in fiscal 2023. However, the Governor's proposed fiscal 2023 budget transfers a net of 20 positions to OCME, including three assistant MEs. Thus, the Department of Legislative Services advises that OCME likely does not need additional staff beyond what is already included in the Governor's proposed fiscal 2023 budget.

In addition, OCME currently has a total of 4.5 ME vacancies, 3.5 of which have been vacant for more than nine months. MDH indicates that the salary range for assistant MEs is currently between \$238,842 and \$370,086. To the extent that OCME continues to have difficulty filling open positions, salary increases for MEs are likely necessary to assist with recruitment and allow OCME to meet NAME standards. Thus, general fund expenditures increase by an indeterminate amount beginning in fiscal 2023 for increased salaries.

Additional staff is likely necessary in fiscal 2024 and beyond to address the ongoing rising caseloads. *For illustrative purposes only*, if case levels continue to increase by 5% per year, one FTE ME is necessary in fiscal 2024 to stay compliant with the caseload ratio standard at a cost of \$316,284 in fiscal 2024. An additional part-time (50%) ME is needed in each year from fiscal 2025 through fiscal 2027, which increases total costs to \$490,614 in fiscal 2025, \$664,912 in fiscal 2026, and \$855,607 in fiscal 2027. This illustrative example does not include any increase in salaries for the additional FTE ME positions in fiscal 2024 through 2027.

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### **Additional Information**

**Prior Introductions:** None.

**Designated Cross File:** None.

**Information Source(s):** Maryland Department of Health; Department of Legislative Services

**Fiscal Note History:** First Reader - February 14, 2022  
fnu2/jc Third Reader - March 21, 2022  
Revised - Amendment(s) - March 21, 2022

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Analysis by: Amber R. Gundlach

Direct Inquiries to:  
(410) 946-5510  
(301) 970-5510