

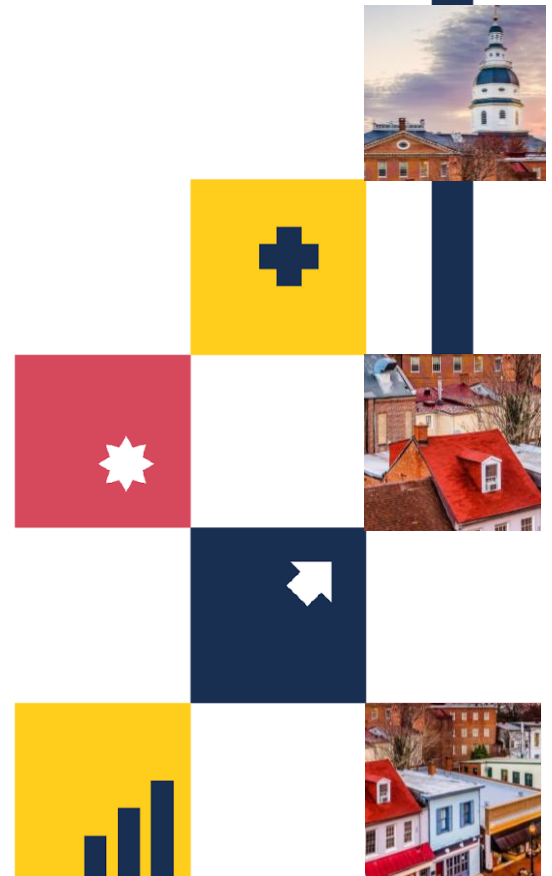
Report on MHCC User Fee Assessment

Workload Study on User Fee Assessment,
Health-General Article, §19-111, Annotated Code of Maryland

February 19, 2026

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Executive Summary

The Maryland Health Care Commission (MHCC) is an independent regulatory agency whose mission is to plan for health system needs, promote informed decision-making, increase accountability, and improve access in a rapidly changing health care environment by providing timely and accurate information on the availability, cost, and quality of health care services to members of the public and to policy makers, providers, and payors.

In order to accomplish its mission and program functions, the Commission requires operating funds, which are special funds that are collected through an assessment on the health care providers and payors (“industries”) it regulates. These funds are used to cover the documented costs of fulfilling the statutory and regulatory duties, allowing the Commission to continue its mission of promoting informed decision-making, enhancing accountability, and improving access to health care throughout the State. The fee is assessed on payors, hospitals, nursing homes, and health care practitioners based on the formula outlined in Health-General Article, §19-111, Annotated Code of Maryland. The amount is derived differently for each industry and is set every four years based on an analysis of the Commission's workload.

MHCC is required to conduct a study and make recommendations every four years regarding the appropriate funding level for the Commission and the allocation of user fees among those currently assessed. The last user fee assessment workload study was released in 2023, delayed due to the pandemic. The 2026 Report on MHCC User Fee Assessment study includes an assessment of:

- Whether the existing allocation methodology aligns with MHCC’s resource commitment across various health care industries;
- Historical and projected workload and budget distributions to determine appropriate user fee allocations;
- Feasibility of extending user fees to additional health care industries not currently subject to assessment;
- Effectiveness and transparency of the existing waiver process for health care practitioners with substantially lower wages; and
- Recommendations related to this study and future workload studies.

Changes resulting from this study will take effect in FY 2027.

User Fee Assessment Methodology: MHCC’s review concludes that the user fee framework is well-structured, transparent, and appropriately aligned with its legislative mandate. The framework demonstrates a strong capacity to adapt to evolving operational requirements.

Workload & Budget Distributions: Based on MHCC’s evaluation of workload and percentages apportioned to each health care industry, the shares of user fee assessments by industry

remain unchanged. They are: Health Insurance Carriers and Plans (26%); Hospitals and Special Hospitals (39%); Nursing Homes (19%); and Health Occupations Boards (16%).

Inclusion of Additional Health Care Industries: MHCC considered extending user fees to other additional health care industries, such as ambulatory surgery centers, home health agencies, and hospice providers. Each of these three provider types account for approximately 1% of current and budgeted FY 2025 and FY 2026 MHCC resource use, which is relatively low. Based on this analysis, at this time MHCC will continue to exclude additional health care industries from the user fee assessment.

Waiver Methodology & Process: In evaluating the waiver process to ensure an equitable foundation for exemptions, MHCC reassessed median annual salaries across categories of health care practitioners using updated data and salary classifications. Based on this analysis, MHCC maintains the current user fee waiver methodology with updated categories of health care practitioners eligible for exemption. The **benchmark annual wage of \$58,297 or \$28.03 per hour** reflects updated salary and classification data and is adopted as the basis for determining waiver eligibility beginning in FY 2027. Categories of health care practitioners who qualify for exemption based on their annual wage being substantially below that of other categories of health care practitioners are those whose annual salaries fall below the established benchmark for all eligible health care classes.

Beginning in the FY 2027 User Fee Assessment exempt categories of health care practitioners currently licensed, certified, or registered by a Maryland Health Occupations Board include: Chiropractic Assistant, Qualified Dental Assistants, Dental Radiation Technologist, Occupational Therapy Assistant, Pharmacist Technician, Physical Therapy Assistant, Certified Nursing Assistant (certified), Certified Medication Technician (certified), Dialysis Technician (certified), Limited X-Ray Machine Operator (registered), Radiographer, and Radiologist Assistant.

Recommendations: MHCC recommends maintaining the current assessment distribution, with an updated list of categories of exempted health care practitioners. MHCC also recommends continuing to study the feasibility of including additional health care industries and provider types in future user fee assessments, ensuring the equitable distribution of user fee allocations across health care entities who benefit from, or are regulated by, the Commission. Finally, to address the trend of budget increases to match MHCC's expanding scope of activities, MHCC recommends an amendment to the cap mechanism, with an upward adjustment of the cap to meet current obligations and incorporation of a routine adjustment factor to ensure cap levels increase as a rate that sustains MHCC operations and critical regulatory functions.

Regulatory Frameworks, References & Past User Fee Workload Assessments

User fees represent financial contributions from specific health care industries and provider types that support MHCC operations. Each stakeholder’s fee is proportionate to the level of services and oversight MHCC provides, ensuring that all beneficiaries of MHCC’s work contribute appropriately to sustaining its mission. Beginning in 2001, MHCC has conducted routine studies to assess the methodology and distribution of user fee assessments. These studies have evolved over time to include additional information, as required by legislation. Studies take into account key regulatory frameworks and references, including:

- **Health General Article §19-11, Annotated Code of Maryland**, governing the MHCC user fee assessment;
- **Legislative mandates and prior reports**, including Chapter 702 (1999), Chapter 627 (2007), the 2014 Sunset Review Recommendations, and the 2016 and 2023 MHCC User Fee Assessment Reports; and
- **MHCC’s statutory, fiscal, and operational obligations**, as defined under Maryland law and regulation, to ensure assessments are distributed in alignment with the Commission’s workload.

Initial Workload Assessment (2001): Chapter 702 of 1999 (House Bill 995) required the Commission to study and make recommendations on the appropriate funding level and the allocation of the user fee among those currently assessed. The Commission completed this requirement and submitted recommendations to the General Assembly in January, 2001. These recommendations were: 1) Raise the user fee cap; 2) Conduct a workload distribution study every four years to confirm that each health care industry’s assessment is consistent with the Commission’s resource commitment to oversight and support to that industry or provider type; and 3) Remove the current apportionments, by industry, from statute and incorporate them into regulations after the study is complete.

The Commission, during the 2001 Legislative session, submitted these recommendations in Senate Bill 786 entitled, “Department of Health and Mental Hygiene – Maryland Health Care Commission – Modifications and Clarifications.” Enacted legislation (Chapter 565) required the Commission to: 1) Raise the user fee cap to \$10 million; 2) Use a methodology that accounts for the portion of the Commission’s workload attributable to each health care industry assessed; and 3) Adopt regulations to permit a waiver of the fee assessment requirements for certain health care practitioners. In adopting these regulations, the Commission is required to consider the hourly wages of the health care practitioner and give preference to exempting health care practitioners with an average hourly wage substantially below that of other health care practitioners.

Including Additional Health Care Industries in User Fee Assessments (2007): Uncodified language in Chapter 627 (House Bill 800) required the Commission to study the extent to which



other health care industries, not currently subject to a user-fee assessment, utilize the Commission resources and to discuss the feasibility and desirability of extending a user fee to additional types of providers or industries regulated by the Commission in a report due by December 1, 2008. This legislation also raised the ceiling on the Commission's current user fee cap to \$12 million to include indirect costs paid to the Department of Health and Mental Hygiene.

Considering Future Workload Requirements (2014): Historically and in prior workload studies the Commission has looked retrospectively at costs over the previous four years when recalculating the apportionment among the health care industries. During the FY 2014 Preliminary Sunset review MHCC suggested to Department of Legislative Services (DLS), and they concurred, that the Commission explore how the workload distribution calculation might, at least in part, consider future workload requirements.

In 2017, the Budget Reconciliation and Financing Act of 2017 increased the cap from \$12 million to \$16 million. The recommended workload distribution calculation method was adopted in the "Workload Study" implemented in FY 2019, which considered future workload in its distribution of the assessment. House Bill 353/Senate Bill 253 (Chapter 711) passed during the 2022 Legislative Session, raised the Commission's billable maximum amount of user fees from \$16 to \$20 million.

The FY 2023 Report on User Fee Assessments, delayed due to the pandemic, did not consider future workload requirements in the study, and instead looked retrospectively at actual expenditures. However, additional requirements on MHCC have routinely increased expenditures beyond the cap. In 2023, MHCC projected that looking forward at two years of appropriation and two years of actual expenditures would drive the assessment higher for each health care industry than it would have been in several years.

In 2025, MHCC contracted with an actuarial firm to conduct a detailed independent review and actuarial analysis to evaluate and improve the allocation of user fees across regulated health care industries. The findings of this analysis are reflected in the 2026 User Fee Assessment Workload Study. The Commission's goal for this study was to assess methodologies and aspects of the User Fee Assessment to ensure the structure is fair, transparent, and aligned with MHCC's resource commitments and requirements. The Commission's independent reviewer considered historical and projected workloads to establish a proper basis for user fee distribution. They also examined the current assessment and waiver methodology to assess or validate whether these methodologies reflect the Commission's resource commitments and priorities across industries.



User Fee Assessment Methodology

This report fulfills the statutory requirements by evaluating the workload of the Commission and reallocating the percentages apportioned to each industry type subject to the assessment. MHCC commissioned a detailed, independent actuarial analysis to evaluate and improve the allocation of user fees across regulated industries. This review concluded that the current user fee assessment framework is well-structured, transparent, and appropriately aligned with MHCC's legislative mandate. Reviewers determined that the framework demonstrates a strong capacity to adapt to evolving operational requirements.

The amount of an individual entity's assessment is based on an allocation formula specific to that industry. Carriers contribute according to premium volume, hospitals and nursing homes share costs through a mix of admissions and gross revenue, and health occupation boards collect a per-license fee during renewals. Health insurance carriers, hospitals, and nursing homes are billed directly by MHCC.

Workload Distribution Analysis

The Commission is organized into five centers, which use a wide range of tools (data gathering, public reporting, planning and regulation) to improve quality, address costs, or increase access to the Maryland health care system.

The **Center for Health Care Facilities Planning and Development** engages in a variety of health planning functions to ensure equitable access to quality and affordable health care across the State. The **Center for Quality Measurement and Reporting** works with hospitals and other health care providers to improve quality and publishes information about providers and certain health plans so that consumers can make informed decisions when seeking care. The **Center for Information Services and Analysis** conducts broad studies, using both Maryland databases and national surveys, to evaluate cost and access to health care services across the State. The fourth center, the **Center for Health Information and Innovative Care Delivery**, has responsibilities that cut across sectors to facilitate the adoption of technology and innovative care models to further public health goals, including managing the secure exchange of electronic health information, promoting primary care, and simplifying prior authorization processes. **Executive Direction** includes operations and strategic planning functions to support the work of the other four centers. Appendix I includes a more detailed description of the functions of each Center.

Workload Distribution Methodology

The methodology for the current workload analysis builds on the foundation of MHCC's prior workload analyses. The Commission's budget is reflected in a distribution of costs to five centers, separated by Project Coding Appropriation codes. Salary and project percentages for each center were applied to actual FY 2020-2024 expenditures to allocate costs by industry for

analysis and validation of prior year spending, and budget and workload projections for FY 2025-2026 for a forward-looking analysis.

This approach produces allocations that capture both historical performance and currently anticipated shifts in MHCC activities and external stakeholder and industry engagement. This distribution informs the allocation of user fee assessment percentages, as determined by the Commission. Refer to Appendix II for workload allocation percentages applied in this analysis.

MHCC assessed its workload and projections to validate whether industry allocations are aligned with MHCC’s actual resource commitments. Based on this analysis, the Commission’s assessment formula remains unchanged, with shares by health care industry as follows:

Table 1: MHCC User Fee Assessment – Share by Health Care Industry

Health Care Industry	Percentage Share of User Fees
<p>Health Insurance Carriers Each carrier is assessed based on the ratio of its total premiums for health benefit plans in Maryland to the total health benefit plan premiums collected by all carriers statewide.</p>	26%
<p>Hospitals and Special Hospitals The hospital assessment uses a two-part formula: 50 percent of the fee is based on the hospital’s share of total inpatient admissions, and 50 percent is based on its share of total gross operating revenue.</p>	39%
<p>Nursing Homes Nursing homes follow the same two-part formula as hospitals, with 50 percent based on total admissions and 50 percent based on total gross operating revenue.</p>	19%
<p>Health Care Practitioners The health occupation boards collect MHCC’s assessment from Maryland members of that occupation as part of the member’s initial or renewal license and remits the assessment to MHCC. Each licensee is assessed a flat fee determined by dividing the total health occupation assessment by the total number of licensees subject to the assessment.</p>	16%

Historical and Projected MHCC Expenditures

The analysis of MHCC’s expenditures and budgets from FY 2020 through FY 2026 demonstrates a clear upward trajectory in regulatory responsibility and related resource allocation. Actual expenditures increased steadily from FY 2020 through FY 2024, reflecting the Commission’s ongoing operational demands. Budget projections from FY 2025 – 2026 indicate a continued rise. This trend underscores MHCC’s expanding scope of activities and the corresponding need



to ensure that user fee apportionments reasonably reflect the evolving distribution of resources across health care industries and provider types.

Table 2 below displays FY 2024 actual expenditures and FY 2025-2026 budgets, distributed by industry. For additional detail including historical analysis, refer to Appendix III for actual expenditures and budget projections for FY 2020-2026 and the distribution of costs across these centers.

Table 2: FY 2024 Expenditures & FY 2025-2026 Budgets by Industry

Fiscal Year	Hospitals	Nursing Homes	Hospitals	Health Boards
FY 2024	\$6,682,633	\$ 3,234,547	\$4,168,050	\$2,608,578
FY 2025	\$7,738,171	\$4,000,004	\$4,738,922	\$3,190,180
FY 2026	\$8,088,543	\$4,104,063	\$5,099,835	\$3,407,969

MHCC’s established budget for Financial Year 2026 (July 1, 2025 to June 30, 2026) is approximately \$20.7 Million, which surpasses the MHCC regulatory maximum fees cap of \$20.0 Million currently set in statute. An independent MHCC-commissioned analysis calculated the average implied annual rate of increases between fee cap changes historically to be 3.27%. Calculating the projected cap in 2026, rounded to the nearest million, results in a recalculated cap of \$23 million for FY 2026. This updated cap level would enable MHCC to assess adequate fees to fund future year budgets. An additional amendment to the cap mechanism to accommodate for yearly increases on an ongoing basis would eliminate the need for routine cap readjustments and provide allowance for potential future budgetary requirements.

Consideration of Inclusion of Additional Health Care Industries and Provider Types

MHCC also assessed the feasibility of incorporating additional industries and health care provider types, including ambulatory surgery centers, home health agencies, and hospice providers, into the user fee framework. It is important to note that any change to include additional industries would require a statutory change. Based on analysis of current and available data, MHCC found that these health care provider types each account for only about 1 percent of MHCC’s total resource use, supporting a decision to exclude them from the user fee assessment process at this time.

However, as the health care landscape and regulatory frameworks continue to change and evolve, MHCC staff will continue to consider options for inclusion of such facilities and other health care industries and providers in future workload distribution studies.



Waiver Process

When assessing health care practitioners, the Commission is required to establish a methodology that uses the average annual wage of a health care practitioner for creating a waiver process to exempt certain health care practitioners from user fee assessments. The methodology must exclude those classes (referred to as “categories”) of health care practitioners that on average earn substantially below that of other practitioners from user fee assessments.

The Commission currently collects health care practitioner assessments from:

- Chiropractors
- Dietitians/Nutritionists
- Occupational Therapists
- Social Workers
- Speech Language Pathologists, Audiologists, Hearing Aid Dispensers
- Nurses
- Podiatrists
- Physical Therapists
- Physicians
- Psychologists
- Pharmacists
- Optometrists
- Professional Counselors and Therapists
- Dentists
- Massage Therapists
- Acupuncturists

Waiver Methodology

MHCC’s independent reviewer considered the current waiver methodology and ways it may be strengthened to ensure a data-driven, financially sustainable, statutorily aligned approach to determine eligibility for user fee waivers. Reviewers found the current approach methodologically sound but noted the need to update benchmarks with current salary and health care practitioner class data inputs to clearly identify categories of health care practitioners eligible for exemptions based on current income benchmarks.

The current methodology described in this report is aligned with past approaches. MHCC updated salary data with the most current available data from the Health Occupation Boards and FY 2024 State Personnel Classification and Salary Guide (SPCSG). The FY 2024 State of Maryland Standard & Bargaining Unit Employees Salary Schedule was then referenced for additional data points, to extract the salary range for each classification, including minimum, maximum, and midpoint values. Salary.com and Glassdoor.com salary figures, accessed October 2025 through January 2026, were also used as reference and input values for the most robust, currently available data.

Although MHCC requests Health Occupation Boards submit data on each practitioner category they are responsible for licensing or certifying, the number of licensees in each category, and whether the board assesses that category of license, this data may not be submitted routinely. To augment this data and complete the task of estimating average wages and licensees, MHCC

used the SPCSG system, Maryland Standard & Bargaining Unit Employees Salary Schedule, and other sources including Salary.com and Glassdoor.com to match classification to grade levels and including all levels under that classification (e.g., Occupational Therapist I, II, III), and compensation from lowest to highest for each category of licensee. MHCC cross-referenced each board, ensuring each type of license and certification was reflected in this salary study.

Collectively, this information provides an overall average for all categories of health care practitioners, including all of those licensed or certified by a Maryland Health Occupations Board, and a tool to comparatively evaluate each category to determine which meet the criteria of having an “annual average wage that is substantially below that of other health care practitioners.” Because the SPCSG encompasses all categories and classes of health care practitioners, with only a few exceptions, using this source provides a consistent benchmark average wage. Using the SPCSG and other publicly available data sets as primary sources provides greater transparency than would be possible if a proprietary wage source was used. Transparency is an important consideration for all the Health Occupational Boards.

Waiver Process and Updated Exempt Categories of Health Care Practitioners

The average practitioner wage was determined in FY 2023 to be \$42,846 annually or \$20.60 per hour. To update this analysis, for each job classification and Health Occupations Board license or certification type, MHCC’s independent reviewer applied the methodology described to calculate the midpoint salary and then averaged all midpoints across all applicable categories of health care practitioners. This produced a **benchmark annual wage of \$58,297 or \$28.03 per hour**, which the Commission adopts as the basis for determining waiver eligibility beginning in FY 2027.

Once the benchmark was established, MHCC considered each category of health practitioner and their respective compensation level to determine if the Commission may exempt any category of health care practitioner whose average annual wage would be considered earning below that of other health care practitioners, as reflected by this updated benchmark.

Categories of health care practitioners earning an average annual wage below the benchmark are considered exempt.

Based on the updated benchmark annual wage, there are new additions to the exempted categories and certain health care practitioner types are no longer exempt, as shown in Tables 3 and 4, below. Some categories of health care practitioners who qualify for exemption are not currently licensed by a Health Occupations Board. These practitioners are unaffected by this waiver as they are not licensed and ineligible for a user fee assessment; however, if licensure were required, this category of practitioners would be exempt.

Table 3: Exempt Categories of Health Care Practitioners Beginning in FY 2027

Licensed, Certified, or Registered Practitioner	Health Occupations Board
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Chiropractic Assistant	Board of Chiropractic Examiners
Qualified Dental Assistants	Board of Dental Examiners
Dental Radiation Technologist	Board of Dental Examiners
Occupational Therapy Assistant	Board of Occupational Therapy Practice
Pharmacist Technician	Board of Pharmacy
Physical Therapy Assistant	Board of Physical Therapy Examiners
Certified Nursing Assistant (<i>certified</i>)	Board of Nursing
Certified Medication Technician (<i>certified</i>)	Board of Nursing
Dialysis Technician (<i>certified</i>)	Board of Nursing
Limited X-Ray Machine Operator (<i>registered</i>)	Board of Physicians
Radiographer	Board of Physicians
Radiologist Assistant	Board of Physicians

Classification categories that are **no longer exempt in FY 2027** based on this new benchmark wage are listed in Table 4, below, noting the rationale for removing the exemption.

Table 4: Health Care Practitioners No Longer Exempt in FY 2027

Licensed, Certified, or Registered Practitioner	Health Occupations Board	Rationale
Dental Hygienist	Board of Dental Examiners	Average salary above the midpoint
Social Worker Associate	Board of Social Work Examiners	Now Licensed Bachelor Social Worker; salary above midpoint
Psychology Associate	Board of Professional Counselors & Therapists	Average salary above the midpoint
Licensed Practical Nurse	Board of Nursing	Average salary above the midpoint
Nurse Psychotherapist	Board of Nursing	Must be a registered nurse; salary above midpoint
Animal Acupuncturist	Board of Acupuncture	Must be licensed acupuncturist; salary above midpoint

Appendix IV includes a detailed breakdown of health care practitioner classifications and categories by Health Occupation Board with SPCSG and Maryland Standard & Bargaining Unit Employee Salary Schedule class codes, where available, and salary midpoints.

Recommendations

While the overall framework for user fee assessments is sound, further refinement in future user fee assessments may be considered to strengthen transparency, data integrity, and



operational effectiveness. Enhancing data completeness would strengthen future user fee assessments. In addition, as MHCC's workload and operations continue to evolve to meet updated regulatory requirements, the Commission may consider updating allocations across health care provider types to ensure equitable distribution and incorporating additional provider types who benefit from the Commission's services. To address increases in workload and operations, the Commission also recommends an upward adjustment of the cap and incorporation of an adjustment factor to ensure cap level funding sustainably supports the Commission's critical functions.

MHCC recommends:

- 1) Maintaining the current assessment distribution in COMAR 10.25.02 – User Fee Assessment on Health Care Practitioners, and COMAR 10.25.03 – User Fee Assessment of Payers, Hospitals, and Nursing Homes, with an updated list of categories of exempted health care professionals.
- 2) Updating COMAR 10.25.03, to update the dates of June 30, 2026, to June 30, 2030, to ensure regulations pair with this updated Workload Study.
- 3) Continuing to study the feasibility in future workload studies of including currently un-assessed health care industries and provider types who benefit from services provided by the Commission.
- 4) Continuing to project future expenditures to ensure methodologies for user fee allocations and waivers are appropriately and equitably distributed across industries, provider types, and classes of health care practitioners.
- 5) Updating the cap mechanism, with an upward adjustment of the cap to meet current obligations and incorporation of a routine adjustment factor to ensure cap levels increase as a rate that sustains MHCC operations and critical regulatory functions.

During the next study, which will be due to the Commission in FY 2030, and implemented to the industries in FY 2031, MHCC will continue to look forward to appropriated and projected expenditures to ensure an equitable distribution to health care provider types who benefit from or are regulated by the Commission.



Appendix I: MHCC Centers and Functions

Executive Direction

This Center's budget incorporates all administrative costs and salaries for ongoing Commission operations. This center also oversees the Maryland Trauma Physician Services Fund, the collection of user fees, fiscal planning and budgeting, and supports the infrastructure, data systems, and program monitoring and integrity functions for the Commission. The budget for Executive Direction includes salaries of the Executive Director, the Administrative and Operations staff, the IT staff, the legal staff, and all other adjustments to salaries for staff. This Center also supports all costs associated with operations that cannot be allocated to specific MHCC Centers, making the expenditures associated with this Center more difficult to allocate.

Center for Analysis and Information Systems

The Center for Analysis and Information Systems has expertise in the creation, maintenance, and mining of large databases by collecting, maintaining, releasing, and reporting on a variety of health care data to inform decision-making by policymakers, payors, providers, and consumers. These data are used to support a variety of policy and legislative reports, evaluations of demonstration programs, and quality reporting initiatives. The Center produces key reports and websites to assist stakeholders with health care decisions related to health expenditures, health insurance, the uninsured, and uncompensated care. The Center:

- Assembles and manages the state's All Payer Claims Database (APCD), also called the Medical Care Data Base (MCDB), which houses claim and eligibility information submitted by approximately 37 private payors, Medicare, and Medicaid;
- Focuses on total health care costs and costs for each health care sector, including hospitals, health care professionals, and prescription drugs;
- Provides analytic and programming services to other work units within the Commission;
- Maintains and continuously strengthens data release protocols and processes to ensure safe and secure data sharing with other state agencies, health care research organizations, academia, and other partners; and
- Collaborates with other state agencies including the Maryland Insurance Administration, providing APCD data to support their rate review process, the Health Services Cost Review Commission, supporting Total Cost of Care monitoring, and the Maryland Health Benefit Exchange, supporting out-of-pocket calculators for consumers.

Center for Quality Measurement and Reporting

The Center for Quality Measurement and Reporting provides concrete, actionable information that consumers can use to make decisions about where to seek needed health care. The Center hosts a consumer-friendly website, Maryland Health Care Quality Reports website (MHCQR),



displaying the quality and outcomes of care provided in all Maryland health care facilities including hospitals, nursing homes, assisted living facilities, hospices, and home health agencies. In 2021, the Center redesigned and consolidated these websites under a common framework that will enable Maryland residents to compare cost and quality of different facilities from hospitals to nursing homes to ambulatory care facilities. The Center is responsible for:

- The Hospital Guide, on MHCQR, with descriptive information and specific quality and outcome measures;
- Expanding public reporting to include aspects of care the help Marylanders make more informed health care decisions, for example, including outcomes of cardiac services including cardiac surgery, family satisfaction measures, and workforce vaccination rates, to help consumers find a safe, trusted place for care;
- The Long Term Care Guide, with information on assisted living and other long term care alternatives to nursing home care. Also part of the MHCQR, this Guide is an easy way to locate and compare nursing homes on quality, cost, and outcomes measures;
- The Health Plan Guide, also on MHCQR, includes public reporting on performance of, and satisfaction with, health plans. Traditionally focused on measures of the clinical performance of HMOs, the Guide is expanding in two ways. MHCC now reports on additional measures of health plan quality and value, including plans achieving national accreditations for health outcomes, and on PPOs in addition to HMOs; and
- Public reporting on disparities, including stratified data on health condition prevalence, an inventory of health equity initiatives searchable by area of focus and county, and public reporting on the extent to which Maryland health plans are addressing health equity.

Center for Health Facilities Planning and Development

The Center for Health Care Facilities Planning and Development develops plans for the supply and distribution of health care facilities and services and regulates the supply and distribution of facilities and services through Certificate of Need and related oversight programs. This Center is responsible for:

- Development and updating of the State Health Plan, a body of regulation that establishes criteria and standards for considering the need, costs and effectiveness, impact, and viability of health care facility capital projects;
- Collecting information on health care facility service capacity and use. Annual data sets on the service capacity of general and special hospitals, freestanding ambulatory surgical facilities, nursing homes, home health agencies, hospices, assisted living facilities, and adult day care facilities are developed;
- Obtaining and assessing hospital registry data bases on cardiac surgery, cardiac catheterization, and percutaneous coronary intervention for regulatory oversight of these services; and



- Administering the Certificate of Need, Certificate of Conformance, and Certificate of On-going Performance programs that regulate certain aspects of health care service delivery by health care facilities.

Center for Health Information Technology and Innovative Care Delivery

The Center for Health Information Technology and Innovative Care Delivery is responsible for the Commission’s health information technology (health IT) and advanced primary care initiatives. This Center promotes the adoption and optimal use of health IT to increase the quality and safety of health care and identifies opportunities to leverage health IT to improve care delivery, support disease surveillance, advance health care knowledge, and shape best practice guidelines. To accelerate health information exchange (HIE), it identifies challenges to the adoption and use of health IT and formulates solutions and sound practices. The Center aims to lead health IT adoption including the implementation of Health Information Exchange (HIE), and the adoption of Electronic Health Record (EHR) systems. This Center is primarily responsible for:

- Certifying electronic health networks that accept electronic health care transactions originating in Maryland to increase the availability and use of health IT through consultative, educational and outreach activities. The Center uses standards-based health IT and congruent privacy and security policies to harmonize HIE efforts throughout the State.
- Developing programs to deepen the use of electronic data interchange between payers and providers, and designating management service organizations to bolster the adoption and progressive use of EHRs.
- Launching and sustaining efforts to diffuse telehealth to improve access to care, reduce costs, improve care coordination, better monitor and treat at-risk populations, and expand population health programs. This includes providing implementation guidance to practices, foster peer learning about best practices, assess the effectiveness of its use in various settings, and build awareness of the utility of telehealth among consumers.
- Managing the Commission’s advanced primary care and practice transformation initiatives that are aimed at implementing strategies focused on maximizing value in health care delivery through better health outcomes and lower cost. The Center convenes the Maryland Primary Care Program (MDPCP) Advisory Council to formulate program design recommendations for the Secretary of the Maryland Department of Health on existing and emerging primary care and cost of care-focused Center for Medicaid & Medicare Services payment models and demonstrations.



Appendix II: Workload Allocation Percentages

Table 5: Workload Allocation Percentages Applied in 2025 Analysis

MHCC Work Unit	Health Insurance Carriers	Nursing Homes	Hospitals	Health Boards
Center for Analysis and Information Systems				
Salaries	48%	6%	25%	21%
Projects	39%	7%	34%	20%
Center for Quality Measurement and Reporting				
Salaries	13%	20%	60%	8%
Projects	14%	25%	61%	0%
Center for Health Care Facilities Planning and Development				
Salaries	6%	40%	50%	4%
Projects	0%	67%	33%	0%
Center for Health Information Technology and Innovative Care Delivery				
Salaries	14%	15%	38%	34%
Projects	18%	7%	35%	41%
Executive Direction				
Salaries	40%	10%	40%	10%
Projects	25%	25%	25%	25%
Residual / Administrative Costs				
<i>Equally attributed by provider type</i>	25%	25%	25%	25%



Appendix III: Expenditures and Budgets and Workload Allocation Percentages

Table 6: FY 2020-2024 Actual Expenditures & FY 2025 – 2026 Budgets

MHCC Work Unit	FY 2020	FY 2021	FY 2022	FY 2023	FY 2024	FY 2025	FY 2026
Center for Analysis and Information Systems							
Salaries	\$1,157,477	\$1,293,075	\$1,318,049	\$1,478,275	\$1,274,836	\$1,521,776	\$1,349,046
Projects	\$2,331,272	\$2,025,125	\$2,543,594	\$2,212,757	\$1,550,160	\$2,279,442	\$3,205,210
Total	\$3,488,749	\$3,318,200	\$3,861,643	\$3,691,033	\$2,824,995	\$3,801,218	\$4,554,256
Center for Quality Measurement and Reporting							
Salaries	\$868,429	\$958,660	\$1,070,178	\$1,108,564	\$1,321,639	\$1,302,784	\$1,204,963
Projects	\$1,513,628	\$1,290,844	\$1,102,799	\$1,166,841	\$1,741,335	\$2,033,426	\$2,150,273
Total	\$2,382,056	\$2,249,504	\$2,172,977	\$2,275,405	\$3,062,973	\$3,336,210	\$3,355,236
Center for Health Care Facilities Planning and Development							
Salaries	\$1,906,428	\$2,074,832	\$2,318,438	\$234,312	\$2,311,760	\$2,773,758	\$2,581,437
Projects	\$135,469	\$101,619	\$64,814	\$55,709	\$5,952	\$401,384	\$551,500
Total	\$2,041,897	\$2,176,451	\$2,383,252	\$2,398,829	\$2,317,713	\$3,175,142	\$3,132,937
Center for Health Information Technology and Innovative Care Delivery							
Salaries	\$1,209,109	\$1,307,090	\$1,403,841	\$1,447,244	\$1,481,481	\$1,631,496	\$1,532,039
Projects	\$191,696	\$418,543	\$445,553	\$507,315	\$364,250	\$806,187	\$1,046,275
Total	\$1,400,806	\$1,725,634	\$1,849,393	\$1,954,559	\$1,845,731	\$2,437,683	\$2,578,314
Executive Direction							
Salaries	\$2,231,583	\$2,370,048	\$2,426,571	\$2,577,453	\$3,223,823	\$2,803,050	\$2,965,549
Projects	\$328,014	\$93,666	\$113,847	\$172,061	\$500,763	\$990,000	\$887,474
Total	\$2,559,598	\$2,463,714	\$2,540,418	\$2,749,514	\$3,724,585	\$3,793,050	\$3,853,023
Residual / Administrative Costs							
<i>25% to each provider type</i>	\$2,566,121	\$2,769,727	\$2,600,726	\$2,698,363	\$2,917,811	\$3,123,974	\$3,226,644
MHCC Total	\$14,439,226	\$14,703,231	\$15,408,410	\$15,767,702	\$16,693,808	\$19,667,277	\$20,700,410



Appendix IV: 2025 Health Care Practitioner Classifications and Salary Midpoints

Table 7: 2025 Health Care Practitioner by Health Occupation Board and Salary Midpoint

Health Occupation Board	Class Code	Classification	Midpoint	Source of Salary Data
Board of Acupuncture	*	Acupuncturist	\$67,707	Salary.com
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	2153	Speech Patholgst Audiolgst I	\$84,876	State Salary Schedule
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	2527	Speech Patholgst Audiolgst II	\$96,720	State Salary Schedule
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	1030	Speech Patholgst Audiolgst III	\$103,206	State Salary Schedule
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	3695	Speech Patholgst Audiolgst IV	\$110,084	State Salary Schedule
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	1244	Speech Patholgst Audiolgst V	\$117,439	State Salary Schedule
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	*	Hearing Aid Dispenser	\$97,942	Salary.com
Board of Examiners for Audiologists, Hearing Aid Dispensers & Speech-Language Pathologist	*	Speech-Language Pathology Assistants	\$94,000	Salary.com
Board of Chiropractic Examiners	*	Chiropractor	\$220,149	Salary.com
Board of Chiropractic Examiners	*	Chiropractic Assistant	\$49,000	Glassdoor.com
Board of Dental Examiners	4228	Dental Assistant I	\$47,908	State Salary Schedule
Board of Dental Examiners	4229	Dental Assistant II	\$50,956	State Salary Schedule
Board of Dental Examiners	4227	Dental Assistant Trainee	X	No Grade 6 in Salary Schedule
Board of Dental Examiners	4677	Dental Hygienist I, CI	\$74,528	State Salary Schedule
Board of Dental Examiners	4230	Dental Hygienist I	\$69,848	State Salary Schedule
Board of Dental Examiners	4678	Dental Hygienist II	\$84,876	State Salary Schedule
Board of Dental Examiners	4231	Dental Hygienist II	\$79,522	State Salary Schedule
Board of Dental Examiners	4679	Dental Hygienist III	90,597	State Salary Schedule
Board of Dental Examiners	4232	Dental Hygienist III	X	Grade already included
Board of Dental Examiners	*	Dental Radiation Technologist	\$48,000	Glassdoor.com
Board of Dental Examiners	4680	Dentist I	\$152,389	State Salary Schedule



Board of Dental Examiners	4233	Dentist I	\$142,752	State Salary Schedule
Board of Dental Examiners	4681	Dentist II	\$162,713	State Salary Schedule
Board of Dental Examiners	4234	Dentist II	X	Grade already included
Board of Dental Examiners	4235	Dentist III Community Health	X	Grade already included
Board of Dental Examiners	4682	Dentist III Residential	X	Not in State Salary Schedule
Board of Dental Examiners	4236	Dentist III Residential	X	Grade already included
Board of Dietetic Practice	*	Dietetic Intern		No Certification/License
Board of Dietetic Practice	3331	Nutritionist I	\$79,522	State Salary Schedule
Board of Dietetic Practice	1272	Nutritionist II	\$84,876	State Salary Schedule
Board of Dietetic Practice	658	Nutritionist III	\$90,597	State Salary Schedule
Board of Dietetic Practice	2771	Nutritionist IV	\$96,720	State Salary Schedule
Board of Dietetic Practice	3543	Nutritionist V	\$103,206	State Salary Schedule
Board of Dietetic Practice	846	Registered Dietitian Dir Cntrl Off	\$103,206	State Salary Schedule
Board of Dietetic Practice	343	Registered Dietitian Dir Hlth Care	\$110,084	State Salary Schedule
Board of Dietetic Practice	3326	Registered Dietitian Dir Hlth Care	X	Grade already included
Board of Dietetic Practice	340	Registered Dietitian I	\$79,522	State Salary Schedule
Board of Dietetic Practice	1440	Registered Dietitian I	\$74,528	State Salary Schedule
Board of Dietetic Practice	341	Registered Dietitian II	\$84,876	State Salary Schedule
Board of Dietetic Practice	1446	Registered Dietitian II	X	Grade already included
Board of Dietetic Practice	342	Registered Dietitian III	\$90,597	State Salary Schedule
Board of Dietetic Practice	1453	Registered Dietitian III	X	Grade already included
Board of Massage Therapy	*	Licensed Massage Therapist	\$63,216	Salary.com
Board of Massage Therapy	*	Registered Massage Practitioners		No Certification / License
Board of Nursing	4654	Asst Dir Of Nursing Med	\$142,752	State Salary Schedule
Board of Nursing	4294	Asst Dir Of Nursing Med	\$133,739	State Salary Schedule
Board of Nursing	4293	Asst Dir Of Nursing Psych	X	Grade already included
Board of Nursing	355	Asst Dir Of Nursing	X	Grade already included
Board of Nursing	6412	Asst Dir Of Nursing	X	Grade already included
Board of Nursing	*	Certified Nursing Assistant	\$35,834	Salary.com
Board of Nursing	*	Certified Medication Technician	\$40,780	Salary.com
Board of Nursing	*	Dialysis Technician	\$50,715	Salary.com



Board of Nursing	*	Electrologist	\$76,314	Salary.com
Board of Nursing	4789	Licensed Practical Nurse I	\$79,522	State Salary Schedule
Board of Nursing	4246	Licensed Practical Nurse I	\$69,848	State Salary Schedule
Board of Nursing	4792	Licensed Practical Nurse II	\$84,876	State Salary Schedule
Board of Nursing	4247	Licensed Practical Nurse II	\$74,528	State Salary Schedule
Board of Nursing	4794	Licensed Practical Nurse III	\$90,597	State Salary Schedule
Board of Nursing	4248	Licensed Practical Nurse III	\$79,522	State Salary Schedule
Board of Nursing	4796	Licensed Practical Nurse III	X	Grade already included
Board of Nursing	4249	Licensed Practical Nurse III	X	Grade already included
Board of Nursing	6313	Licensed Practical Nurse III	X	Grade already included
Board of Nursing	*	Nurse Anesthetist	\$239,642	Salary.com
Board of Nursing	4818	Nurse Practitioner/Midwife I	\$125,317	State Salary Schedule
Board of Nursing	4256	Nurse Practitioner/Midwife I	\$117,439	State Salary Schedule
Board of Nursing	4819	Nurse Practitioner/Midwife II	\$133,739	State Salary Schedule
Board of Nursing	4257	Nurse Practitioner/Midwife II	X	Grade already included
Board of Nursing	4825	Nurse Practitioner/Midwife Super	\$142,752	State Salary Schedule
Board of Nursing	4258	Nurse Practitioner/Midwife Super	X	Grade already included
Board of Nursing	354	Nursing Education Supervisor	X	Grade already included
Board of Nursing	4260	Nursing Education Supervisor	X	Grade already included
Board of Nursing	4828	Nursing Instructor	X	Grade already included
Board of Nursing	4259	Nursing Instructor	X	Grade already included
Board of Nursing	4261	Nursing Prgm Conslt/Admin I	X	Grade already included
Board of Nursing	4262	Nursing Prgm Conslt/Admin II	X	Grade already included
Board of Nursing	4263	Nursing Prgm Conslt/Admin III	X	Grade already included
Board of Nursing	4264	Nursing Prgm Conslt/Admin IV	\$152,389	State Salary Schedule
Board of Nursing	5523	Registered Nurse	X	Grade already included
Board of Nursing	348	Registered Nurse	X	Grade already included
Board of Nursing	4284	Registered Nurse	\$103,206	State Salary Schedule
Board of Nursing	*	Registered Nurse – Advanced Practice		
Board of Nursing	5524	Registered Nurse Charge	\$117,439	State Salary Schedule
Board of Nursing	5392	Registered Nurse Charge	X	Grade already included
Board of Nursing	6655	Registered Nurse Charge	X	Grade already included



Board of Nursing	4869	Registered Nurse Charge Med	X	Grade already included
Board of Nursing	5517	Registered Nurse Charge Med	X	Grade already included
Board of Nursing	4867	Registered Nurse Charge Med	X	Grade already included
Board of Nursing	4286	Registered Nurse Charge Med	X	Grade already included
Board of Nursing	5518	Registered Nurse Charge Psych	X	Grade already included
Board of Nursing	349	Registered Nurse Charge Psych	X	Grade already included
Board of Nursing	4285	Registered Nurse Charge Psych	X	Grade already included
Board of Nursing	4873	Registered Nurse Manager Med	\$133,739	State Salary Schedule
Board of Nursing	4292	Registered Nurse Manager Med	X	Grade already included
Board of Nursing	351	Registered Nurse Manager Psych	X	Grade already included
Board of Nursing	4291	Registered Nurse Manager Psych	X	Grade already included
Board of Nursing	4888	Registered Nurse Quality Imp Med	\$133,739	State Salary Schedule
Board of Nursing	5521	Registered Nurse Quality Imp Med	X	Grade already included
Board of Nursing	4889	Registered Nurse Quality Imp Med	X	Grade already included
Board of Nursing	4406	Registered Nurse Quality Imp Med	X	Grade already included
Board of Nursing	4891	Registered Nurse Quality Imp Psych	X	Grade already included
Board of Nursing	5522	Registered Nurse Quality Imp Psych	X	Grade already included
Board of Nursing	4892	Registered Nurse Quality Imp Psych	X	Grade already included
Board of Nursing	4407	Registered Nurse Quality Imp Psych	X	Grade already included
Board of Nursing	5525	Registered Nurse Supv	\$125,317	State Salary Schedule
Board of Nursing	4877	Registered Nurse Supv	X	Grade already included
Board of Nursing	5576	Registered Nurse Supv	X	Grade already included
Board of Nursing	4881	Registered Nurse Supv Med	X	Grade already included
Board of Nursing	5519	Registered Nurse Supv Med	X	Grade already included
Board of Nursing	4288	Registered Nurse Supv Med	X	Grade already included
Board of Nursing	5520	Registered Nurse Supv Psych	X	Grade already included
Board of Nursing	350	Registered Nurse Supv Psych	X	Grade already included
Board of Nursing	4287	Registered Nurse Supv Psych	X	Grade already included
Board of Nursing	4300	Respiratory Care Nurse	\$110,084	State Salary Schedule
Board Of Occupational Therapy Practice	4832	Occupational Therapist I	\$84,876	State Salary Schedule



Board Of Occupational Therapy Practice	4265	Occupational Therapist I	\$74,528	State Salary Schedule
Board Of Occupational Therapy Practice	4834	Occupational Therapist II	\$96,720	State Salary Schedule
Board Of Occupational Therapy Practice	4266	Occupational Therapist II	\$84,876	State Salary Schedule
Board Of Occupational Therapy Practice	4836	Occupational Therapist III Adv	\$103,206	State Salary Schedule
Board Of Occupational Therapy Practice	4396	Occupational Therapist III Adv	X	Grade already included
Board Of Occupational Therapy Practice	4837	Occupational Therapist III Lead	X	Grade already included
Board Of Occupational Therapy Practice	4267	Occupational Therapist III Lead	X	Grade already included
Board Of Occupational Therapy Practice	6148	Occupational Therapist III	X	Grade already included
Board Of Occupational Therapy Practice	4833	Occupational Therapist Institutional, CI-4833	\$90,597	State Salary Schedule
Board Of Occupational Therapy Practice	15	Occupational Therapist Institutional-0015	\$79,522	State Salary Schedule
Board Of Occupational Therapy Practice	4838	Occupational Therapist Supervisor, CI-4838	\$110,084	State Salary Schedule
Board Of Occupational Therapy Practice	4268	Occupational Therapist Supervisor-4268	\$96,720	State Salary Schedule
Board Of Occupational Therapy Practice	4830	Occupational Therapy Asst I	\$57,716	State Salary Schedule
Board Of Occupational Therapy Practice	4270	Occupational Therapy Asst I	\$54,223	State Salary Schedule
Board Of Occupational Therapy Practice	4831	Occupational Therapy Asst II	\$61,464	State Salary Schedule
Board Of Occupational Therapy Practice	4271	Occupational Therapy Asst II	\$57,716	State Salary Schedule
Board Of Occupational Therapy Practice	4269	Occupational Therapy Consultant	\$96,720	State Salary Schedule
Board of Optometry	*	Optometrist	\$143,594	Salary.com
Board of Pharmacy	688	Pharmacist I	\$96,720	State Salary Schedule
Board of Pharmacy	2376	Pharmacist II	\$103,206	State Salary Schedule
Board of Pharmacy	3451	Pharmacist III	\$110,084	State Salary Schedule
Board of Pharmacy	*	Pharmacist Technician	\$43,904	Glassdoor.com
Board of Physical Therapy	4841	Physical Therapist I	\$90,597	State Salary Schedule
Board of Physical Therapy	4272	Physical Therapist I	\$84,876	State Salary Schedule
Board of Physical Therapy	4843	Physical Therapist II	\$103,206	State Salary Schedule
Board of Physical Therapy	4273	Physical Therapist II	\$96,720	State Salary Schedule
Board of Physical Therapy	4845	Physical Therapist III Adv	\$110,084	State Salary Schedule
Board of Physical Therapy	4397	Physical Therapist III Adv	X	Grade already included
Board of Physical Therapy	4846	Physical Therapist III Lead	X	Grade already included
Board of Physical Therapy	4274	Physical Therapist III Lead	X	Grade already included



Board of Physical Therapy	6147	Physical Therapist III	X	Grade already included
Board of Physical Therapy	4842	Physical Therapist Institutional	\$96,720	State Salary Schedule
Board of Physical Therapy	14	Physical Therapist Institutional	\$90,597	State Salary Schedule
Board of Physical Therapy	4847	Physical Therapist Supervisor	\$117,439	State Salary Schedule
Board of Physical Therapy	4275	Physical Therapist Supervisor	\$110,084	State Salary Schedule
Board of Physical Therapy	4839	Physical Therapy Assistant I	\$57,716	State Salary Schedule
Board of Physical Therapy	4276	Physical Therapy Assistant I	\$54,223	State Salary Schedule
Board of Physical Therapy	4840	Physical Therapy Assistant II	\$61,464	State Salary Schedule
Board of Physical Therapy	4277	Physical Therapy Assistant II	\$57,716	State Salary Schedule
Board of Physical Therapy	6324	Therapy Services Mgr	\$110,084	State Salary Schedule
Board of Physical Therapy	4932	Therapy Services Mgr	\$125,317	State Salary Schedule
Board of Physicians	*	Athletic Trainer	\$61,611	Salary.com
Board of Physicians	*	Genetic Counselor	\$100,651	Glassdoor.com
Board of Physicians	*	Genetic Counselor (Supervised)	\$75,000	Glassdoor.com
Board of Physicians	*	Limited X-Ray Machine Operator	\$56,657	Salary.com
Board of Physicians	*	Naturopathic Doctor	\$144,462	Salary.com
Board of Physicians	*	Nuclear Medicine Technologist	\$100,611	Salary.com
Board of Physicians	*	Perfusionist	\$163,473	Salary.com
Board of Physicians	5187	Physician Administration Director	X	Grade already included
Board of Physicians	4278	Physician Assistant I	\$125,317	State Salary Schedule
Board of Physicians	4861	Physician Assistant I	\$133,739	State Salary Schedule
Board of Physicians	4279	Physician Assistant II	X	Grade already included
Board of Physicians	4862	Physician Assistant II	\$142,752	State Salary Schedule
Board of Physicians	4951	Physician Clinical Specialist	X	Not in State Salary Schedule
Board of Physicians	4606	Physician Clinical Specialist	X	Not in State Salary Schedule
Board of Physicians	4949	Physician Clinical Staff	X	Not in State Salary Schedule
Board of Physicians	4603	Physician Clinical Staff	X	Not in State Salary Schedule
Board of Physicians	6808	Physician Program Manager I	X	Not in State Salary Schedule



Board of Physicians	4609	Physician Program Manager II	X	Not in State Salary Schedule
Board of Physicians	4610	Physician Program Manager III	X	Not in State Salary Schedule
Board of Physicians	4613	Physician Program Manager IV	X	Not in State Salary Schedule
Board of Physicians	6805	Physician Program Specialist	X	Not in State Salary Schedule
Board of Physicians	4602	Physician Program Staff	X	Not in State Salary Schedule
Board of Physicians	4611	Physician Supervisor	X	Not in State Salary Schedule
Board of Physicians	*	Polysomnographic Technologist	\$67,900	Salary.com
Board of Physicians	6710	PSCS Physician Program Manager III	X	Not in State Salary Schedule
Board of Physicians	*	Radiation Therapist	\$102,399	Salary.com
Board of Physicians	*	Radiographer	\$57,700	Salary.com
Board of Physicians	4280	Radiologic Technologist I	\$54,223	No Certification/License
Board of Physicians	4281	Radiologic Technologist II	\$57,716	No Certification/License
Board of Physicians	4282	Radiologic Technologist Supv	\$61,464	No Certification/License
Board of Physicians	*	Radiologist Assistant	\$39,485	Salary.com
Board of Physicians	2412	Respiratory Care Praction I	\$65,482	State Salary Schedule
Board of Physicians	2413	Respiratory Care Praction II	\$74,528	State Salary Schedule
Board of Physicians	2414	Respiratory Care Praction Ld	\$79,522	State Salary Schedule
Board of Physicians	2415	Respiratory Care Praction Supv	\$84,876	State Salary Schedule
Board of Physicians	184	Respiratory Therapist I	x	Grade already included
Board of Physicians	2388	Respiratory Therapist II	x	Grade already included
Board of Podiatry	*	Podiatrists	\$258,646	Salary.com
Board of Professional Counselors & Therapists	4615	A/D Associate Counselor Provisional	\$79,522	State Salary Schedule
Board of Professional Counselors & Therapists	1562	A/D Associate Counselor Provisional	\$69,848	State Salary Schedule
Board of Professional Counselors & Therapists	4625	A/D Associate Counselor Supervisor	\$103,206	State Salary Schedule



Board of Professional Counselors & Therapists	1569	A/D Associate Counselor Supervisor	\$90,597	State Salary Schedule
Board of Professional Counselors & Therapists	4618	A/D Associate Counselor	x	Grade already included
Board of Professional Counselors & Therapists	4621	A/D Associate Counselor, Lead	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	1564	A/D Associate Counselor, Lead	\$84,876	State Salary Schedule
Board of Professional Counselors & Therapists	1563	A/D Associate Counselor	x	Grade already included
Board of Professional Counselors & Therapists	4633	A/D Professional Counselor Advanced	\$110,084	State Salary Schedule
Board of Professional Counselors & Therapists	1567	A/D Professional Counselor Advanced	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	4627	A/D Professional Counselor Provisional	\$90,597	State Salary Schedule
Board of Professional Counselors & Therapists	1565	A/D Professional Counselor Provisional	\$79,522	State Salary Schedule
Board of Professional Counselors & Therapists	4636	A/D Professional Counselor Supervisor	x	Grade already included
Board of Professional Counselors & Therapists	1568	A/D Professional Counselor Supervisor	x	Grade already included
Board of Professional Counselors & Therapists	4630	A/D Professional Counselor	\$103,206	State Salary Schedule
Board of Professional Counselors & Therapists	1566	A/D Professional Counselor	x	Grade already included
Board of Professional Counselors & Therapists	4639	A/D Supervised Counselor Provisional	\$69,848	State Salary Schedule
Board of Professional Counselors & Therapists	1560	A/D Supervised Counselor Provisional	\$61,464	State Salary Schedule
Board of Professional Counselors & Therapists	4642	A/D Supervised Counselor	\$79,522	State Salary Schedule
Board of Professional Counselors & Therapists	1561	A/D Supervised Counselor	x	Grade already included
Board of Professional Counselors & Therapists	*	Licensed Behavior Analyst	\$126,719	Salary.com
Board of Professional Counselors & Therapists	4787	Licensed Clinical A/D Counselor Adv	\$103,206	State Salary Schedule
Board of Professional Counselors & Therapists	1572	Licensed Clinical A/D Counselor Adv	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	4788	Licensed Clinical A/D Counselor Supv	x	Grade already included
Board of Professional Counselors & Therapists	1573	Licensed Clinical A/D Counselor Supv	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	4786	Licensed Clinical A/D Counselor	X	Grade already included



Board of Professional Counselors & Therapists	*	Licensed Clinical Professional Art Therapist	\$70,000	Glassdoor.com
Board of Professional Counselors & Therapists	4785	Licensed Graduate A/D Counselor	\$84,876	State Salary Schedule
Board of Professional Counselors & Therapists	1570	Licensed Graduate A/D Counselor	\$79,522	State Salary Schedule
Board of Professional Counselors & Therapists	*	Licensed Graduate Marriage and Family Therapist	\$80,000	Salary.com
Board of Professional Counselors & Therapists	*	Licensed Graduate Professional Art Therapist	\$65,000	Glassdoor.com
Board of Professional Counselors & Therapists	*	Licensed Graduate Professional Counselor	\$62,000	Salary.com
Board of Professional Counselors & Therapists	*	Licensed Marriage and Family Therapist	\$87,000	Salary.com
Board of Professional Counselors & Therapists	*	Licensed Professional Counselor	\$70,000	Salary.com
Board of Professional Counselors & Therapists	4706	PSCS A/D Associate Counselor Provisional	\$74,528	State Salary Schedule
Board of Professional Counselors & Therapists	4710	PSCS A/D Associate Counselor Supervisor	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	4709	PSCS A/D Associate Counselor, Lead	\$90,597	State Salary Schedule
Board of Professional Counselors & Therapists	4707	PSCS A/D Associate Counselor	\$84,876	State Salary Schedule
Board of Professional Counselors & Therapists	4711	PSCS A/D Professional Counselor Advanced	\$103,206	State Salary Schedule
Board of Professional Counselors & Therapists	4708	PSCS A/D Professional Counselor Provisional	\$84,876	State Salary Schedule
Board of Professional Counselors & Therapists	4712	PSCS A/D Professional Counselor Supervisor	x	Grade already included
Board of Professional Counselors & Therapists	4700	PSCS A/D Professional Counselor	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	4704	PSCS A/D Supervised Counselor Provisional	\$65,482	State Salary Schedule
Board of Professional Counselors & Therapists	4705	PSCS A/D Supervised Counselor	\$74,528	State Salary Schedule
Board of Professional Counselors & Therapists	6907	PSCS Management Advocate I	x	No Certification/License
Board of Professional Counselors & Therapists	6908	PSCS Management Advocate II	\$96,720	State Salary Schedule
Board of Professional Counselors & Therapists	6910	PSCS Management Advocate Supervisor	\$110,084	State Salary Schedule
Board of Psychologists	6052	Psychologist Correctional	\$125,317	State Salary Schedule
Board of Psychologists	4702	Psychologist I	\$133,739	State Salary Schedule



Board of Psychologists	612	Psychologist I	x	Grade already included
Board of Psychologists	4703	Psychologist II	\$142,752	State Salary Schedule
Board of Psychologists	613	Psychologist II-0613	x	Grade already included
Board of Psychologists	464	Psychologist Intern	x	Not in State Salary Schedule
Board of Psychologists	619	Psychology Associate Doct Corr	\$110,084	State Salary Schedule
Board of Psychologists	4701	Psychology Associate Doctorate	x	Grade already included
Board of Psychologists	614	Psychology Associate I Corr	\$84,876	State Salary Schedule
Board of Psychologists	4853	Psychology Associate I Masters	\$79,522	State Salary Schedule
Board of Psychologists	608	Psychology Associate I Masters	\$74,528	State Salary Schedule
Board of Psychologists	616	Psychology Associate II Corr	\$90,597	State Salary Schedule
Board of Psychologists	4855	Psychology Associate II Masters	x	Grade already included
Board of Psychologists	609	Psychology Associate II Masters	x	Grade already included
Board of Psychologists	4857	Psychology Associate III Masters	x	Grade already included
Board of Psychologists	610	Psychology Associate III Masters	x	Grade already included
Board of Psychologists	4859	Psychology Services Chief	\$152,389	State Salary Schedule
Board of Psychologists	2148	Psychology Services Chief	\$142,752	State Salary Schedule
Board of Social Work Examiners	*	Licensed Bachelor Social Worker	\$60,000	Glassdoor.com
Board of Social Work Examiners	*	Licensed Master Social Worker	\$64,098	Salary.com
Board of Social Work Examiners	4718	PSCS Social Work Manager, Criminal Justice	\$125,317	State Salary Schedule
Board of Social Work Examiners	4717	PSCS Social Work Reg Supv, Criminal Justice	\$117,439	State Salary Schedule
Board of Social Work Examiners	4715	PSCS Social Worker Adv, Criminal Justice	\$103,206	State Salary Schedule
Board of Social Work Examiners	4713	PSCS Social Worker I, Criminal Justice	\$90,597	State Salary Schedule
Board of Social Work Examiners	4714	PSCS Social Worker II, Criminal Justice	\$96,720	State Salary Schedule
Board of Social Work Examiners	4716	PSCS Social Worker Supv, Criminal Justice	\$110,084	State Salary Schedule
Board of Social Work Examiners	6162	Social Service Admin I	\$84,876	State Salary Schedule
Board of Social Work Examiners	383	Social Service Admin II	\$90,597	State Salary Schedule
Board of Social Work Examiners	2052	Social Service Admin III	\$96,720	State Salary Schedule



Board of Social Work Examiners	194	Social Service Admin IV	\$103,206	State Salary Schedule
Board of Social Work Examiners	2042	Social Service Admin V	\$110,084	State Salary Schedule
Board of Social Work Examiners	195	Social Service Admin VI	\$117,439	State Salary Schedule
Board of Social Work Examiners	6760	Social Work Manager, Criminal Justice	\$110,084	State Salary Schedule
Board of Social Work Examiners	4178	Social Work Manager, Health Svcs	\$117,439	State Salary Schedule
Board of Social Work Examiners	1996	Social Work Manager, Health Svcs	x	Grade already included
Board of Social Work Examiners	4179	Social Work Prgm Admin, Health Svcs	x	Grade already included
Board of Social Work Examiners	1995	Social Work Prgm Admin, Health Svcs	\$ 103,206	State Salary Schedule
Board of Social Work Examiners	2007	Social Work Reg Supv, Criminal Justice	x	Grade already included
Board of Social Work Examiners	4514	Social Work Supv Fam Svcs	\$96,720	State Salary Schedule
Board of Social Work Examiners	4180	Social Work Supv Health Svcs	x	Grade already included
Board of Social Work Examiners	1994	Social Work Supv Health Svcs	x	Grade already included
Board of Social Work Examiners	2006	Social Work Supv, Criminal Justice	x	Grade already included
Board of Social Work Examiners	4515	Social Work Therapist Fam Svcs	\$96,720	State Salary Schedule
Board of Social Work Examiners	4894	Social Worker Adv Health Svcs, CI	x	Grade already included
Board of Social Work Examiners	1993	Social Worker Adv Health Svcs	x	Grade already included
Board of Social Work Examiners	2005	Social Worker Adv, Criminal Justice	x	Grade already included
Board of Social Work Examiners	4512	Social Worker I Fam Svcs	\$84,876	State Salary Schedule
Board of Social Work Examiners	4181	Social Worker I, Health Svcs	\$90,597	State Salary Schedule
Board of Social Work Examiners	1991	Social Worker I, Health Svcs	x	Grade already included
Board of Social Work Examiners	2003	Social Worker I, Criminal Justice	x	Grade already included
Board of Social Work Examiners	4513	Social Worker II Fam Svcs	x	Grade already included
Board of Social Work Examiners	4182	Social Worker II, Health Svcs	\$96,720	State Salary Schedule
Board of Social Work Examiners	1992	Social Worker II, Health Svcs	x	Grade already included
Board of Social Work Examiners	2004	Social Worker II, Criminal Justice	x	Grade already included

