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The Department of Postmortem Examiners was created in 1939 to replace a decentralized system of local coroners (Chapter 69, Acts of 1939). Now, deputy medical examiners in each county investigate violent and suspicious deaths or deaths unattended by physicians. They file with the Office of the Chief Medical Examiner reports of all deaths investigated. Records of the Department are open for inspection to the family of the deceased and are acceptable in court as evidence of the facts contained (Code Health-General Article, sec. 5-309).

The Department is directed by the State Postmortem Examiners Commission composed of four ex officio members and a representative of the Department of Health and Mental Hygiene selected by the Secretary of Health and Mental Hygiene. The Commission appoints all professional personnel (Code Health-General Article, sec. 5-302 through 5-312).

### ASSISTANT SECRETARY FOR HEALTH REGULATION

Deborah Lewis-Idema, *Assistant Secretary*

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The Assistant Secretary for Health Regulation brings together the principal health regulatory functions of the Department and provides leadership and guidance for the Department's regulatory and licensing programs.

The Assistant Secretary coordinates the activities of the State Health Services Cost Review Commission and the State Health Resources Planning Commission and assures that both receive adequate administrative support.

With the assistance of a program evaluation staff, the Assistant Secretary develops recommendations for implementation by the Secretary to modify and shape the role of the Department. The Assistant Secretary assists in defining health problems, evaluating new and existing Department programs, and developing and applying knowledge of federal and other external trends so as to advise the Secretary on program emphasis and Department direction. The major organizational components of the Assistant Secretariat for Health Regulation are the State Health Services Cost Review Commission, the State Health Resources Planning

Commission, and the Office of Regulatory Services.

### STATE HEALTH SERVICES COST REVIEW COMMISSION

*Chairperson:* David P. Scheffenacker, 1985

Dr. Carl J. Schramm, 1985; Stephen W. McNierney, 1986; Roland Smoot, M.D., 1986; Richard M. Woodfin, 1986; Don S. Hiller, 1987; Earl J. Smith, 1987; Virginia B. Layfield, 1988.

Harold A. Cohen, Ph.D., *Executive Director*

Jack Keane, *Deputy Director*

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The State Health Services Cost Review Commission was established by Chapter 627, Acts of 1971, to monitor all matters relating to the fiscal affairs of Maryland's hospitals and related institutions. This enables the Commission to cause public disclosure of each hospital's financial position, its verified total costs incurred in rendering health services, and the level of reasonableness of its rates as determined by the Commission's review and certification. It also provides information to determine the adequacy of each institution's financial resources to meet its financial requirements. The Commission concerns itself with solutions when these resources are inadequate.

The Commission assures purchasers of hospital health care services that total costs are reasonably related to the total services offered by the hospital, that aggregate rates are set in reasonable relationship to the hospital's aggregate costs, and that rates are set equitably among all purchasers of services without undue discrimination.

The Commission consists of seven members appointed to four-year terms by the Governor. Authorization for the Commission continues until July 1, 1993 (Code Health-General Article, secs. 19-201 through 19-222).

### STATE HEALTH RESOURCES PLANNING COMMISSION

*Chairperson:* Carville M. Akehurst, 1986

James T. Estes, M.D., 1985; Charlene Connolly Quinn, 1985; Dominic B. Raino, 1985; Harvey R. Wertlieb, 1985; Spencer Foreman, M.D., 1986; Richard Hug, 1986; Nick Rajacich, 1986; Otis Warren, Jr., 1986; Vivian C. Bailey, 1987;