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**BALTIMORE CITY COUNCIL
PUBLIC HEALTH AND ENVIRONMENT
COMMITTEE**

Mission Statement

On behalf of the Citizens of Baltimore City, the mission of the **Public Health and Environment Committee** is dedicated to safeguarding the well-being of Baltimore's residents by advancing policies that promote health equity, environmental justice, and sustainability. Recognizing the deep connection between public health and the environment, the committee works to reduce health disparities, improve access to essential services, and address climate-related challenges that impact communities.

**The Honorable Phylicia Porter
Chair**

PUBLIC HEARING

**WEDNESDAY, AUGUST 5, 2026
10:00 AM**

COUNCIL CHAMBERS

RECONVENING HEARING

Legislative Oversight #LO25-0007

Behavioral Health

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Zeke Cohen – Council President



Office of Council Services

Nancy Mead - Director
100 Holliday Street, Room 415
Baltimore, MD 21202

BILL SYNOPSIS

Committee: Public Health and Environment

Legislative Oversight: LO25-0007

Behavioral Health **Reconvening Hearing**

Sponsor: *Councilmember Porter, et al*

Introduced: *January 27, 2025*

Purpose:

For the purpose of reviewing Baltimore City’s capacity to respond to increasing behavioral health challenges, including Baltimore City Health Department staff, data-based evaluation and reporting, alignment of City-funded non-City entities, and the visibility of pro-behavioral health efforts.

Effective: Upon enactment.

Partners and/or Organizations that have been invited:

- | |
|--|
| <ul style="list-style-type: none">• Representative(s) from Behavioral Health Systems Baltimore• Health Department - Tentative |
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Analysis

Background

The committee held the last hearing on April 1, 2026. Following are notes taken during that hearing:

Major Speakers

- Public Testimony
 - Stacey Loveless, Speaker
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- Other Speakers

- Adrienne Breidenstine, Behavioral Health System Baltimore, BHSB
- Kim Wireman, Powell Recovery Center

Major Issues Discussed

1. Chairwoman Porter gave opening remarks. Some remarks were:
 - Today, we are continuing discussions about this area
 - Conversations similar to those we will have today are important!
 - Today we will discuss:
 - State regulations
 - Protecting people in Baltimore City
 - Sharing the work that goes on with our partners
 - Identifying the root causes
 - She also explained to the public/listening audience why she allows public testimony first.
2. One attendee gave public testimony. She stated, “conducting this oversight is essential!” She also talked about some of the hardships she experienced doing her recovery phase.
3. The representative from the Behavioral Health System Baltimore gave a PowerPoint Presentation. **A copy is on file.** Some topics discussed and presented in the PowerPoint Presentation were:
 - Core functions
 - Mental Health Clinics
 - Help line (access to care) – call 988
 - COMAR 10.63 Revisions (where they are now)
 - Also stated, “Is excited to seeing the revisions going into effect!”
 - Procedures/processes for “filing complaint(s)”
4. Chairwoman Porter gave some remarks regarding the COMAR 10.63 revisions.
5. The representatives from the Powell Recovery Center gave a PowerPoint Presentation. **A copy is on file.** Some topics discussed and presented in the PowerPoint Presentation were:
 - Public Insurance System
 - Blindspot(s) in behavioral health
 - What centers does and the services provided
 - The representatives/employees of the Center continue to ask themselves, “What more can we do? And what is actually working.”
 - Discussed the processes associates with the “data warehouse”
 - There is a need for more outcome data!
6. Chairwoman Porter talked about why she invited Ms. Wireman, Powell Recovery Center to the hearing. She commented on the importance of “practice-based evidence; looking at where folks can be now as well in the future (intervention).” This is an opportunity for both organizations (Behavioral Health System and Powell Recovery Center) to work together, she said.

7. Committee/council members asked questions, stated concerns, and made comments. Some highlighted topics of discussion, comments and/concerns were:

○ Committee requests: **Chairwoman Porter: - To BHBS**

1. Provide the Audit Report(s) for Service Providers at the “aggregate level”

• To use for upcoming budget season

○ To generate new ideas for Council

○ To have a more assertive discussion regarding policy

○ Specifically looking for types of complaints

○ To examine if the audits are effective or not

2. Provide the data surrounding complaints. To include:

○ Types of complaints

i. At the district level

○ A committee member said to the representative from the Powell Recovery Center, “I am glad to see you that you are tracking folks, outcomes and collecting the data pertaining to same.”

• What does it cost to operate your data base at the Powell Center? **Answer: Don’t have that information now but can research and report back.**

• How intensive is time for collecting data?

• How are people coming into the Center in terms of their circumstances? We want to make sure we are dealing with the root causes. Is data available for same? **Answer: Yes**

○ COMAR 10.63

• How are these update requirements being made? Is it a bill?

• Data requirements:

○ Comments:

▪ The best opportunity to improve quality is to do so before opening to make sure:

• You have good people, good processes, good accountability, good spot checks, to identify things working/not working and to sort the good from the bad?

○ The regulations that are being updated, “Is there any data component being required regarding licensing? And, if there is, will it be made to the public?”

○ There is not much information out there for patients looking for quality care, they usually go to the closes facility to them and may not get the best services needed. Concern: Improved quality!

○ Committee requests: **Committee member Conway: - To BHBS**

3. During the COMAR 10.63 Revisions – if possible, add some type of data requirement that can be made public so people can sort the good from the bad

○ Licensing Process

• Is there a requirement in the licensing process for data to be reported to the State so that we can have regular updates on outcomes and/or output from various providers?

○ Accreditation Surveys

- Concern: State not sharing data with City of Baltimore
 - Per Chairwoman Porter a new bill is being worked on that will require surveys in the future to be submitted to the Board of Municipal and Zoning Appeals and the Office of Consumer Affairs.
 - Gaps in Care – is of concern
 - There should be some way for “information sharing” between organizations, agencies and hospitals!
 - There should be more reporting between case managers and hospitals!
 - Engaging hospitals to close gaps, to be more organized!
 - More coordinated needed for people to get the care they need!
 - Per committee member Ramos, “I would be interested in following up on “closing gaps.”
 - Housing
 - Concern: Housing stability is important!
 - What is happening in this area?
 - We want to make sure that the housing piece is up front, centered and working!
 - Residential Treatment Centers in Neighborhoods
 - Talk more about this
 - We need a better understanding of what is going on in our neighborhoods
 - Enforcement of Unlicensed/Uncertified Facilities (Recovery Homes)
 - This is of concern
 - Per Chairwoman Porter, “Stay tuned – there is an upcoming bill to address this issue, to outlaw unlicensed facilities in Baltimore City! To adhere to certain standards!
 - Concentration of Providers – is of concern
 - Concentration of providers could be bad for clients!
 - It could have an impact on the customers who need care!
8. Hearing recessed.
9. On Wednesday, August 5, 2026, the committee will continue (reconvene) **its series of scheduled hearings surrounding this topic.**

Additional Information

Fiscal Note: None

Information Source(s): Notes taken during April 1, 2026, committee hearing.

Marguerite Currin

Analysis by: Marguerite Currin
 Analysis Date: August 3, 2026

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