

**CITY OF BALTIMORE
COUNCIL BILL 25-0013
(First Reader)**

Introduced by: Councilmember Porter

Cosponsors: Councilmembers Dorsey, Conway, Schleifer, Middleton, Torrence, Gray, Bullock,
Jones, Ramos, and President Cohen

Introduced and read first time: January 27, 2025

Assigned to: Public Health and Environment Committee

REFERRED TO THE FOLLOWING AGENCIES: City Solicitor, Baltimore City Public School System,
Health Department, Department of Finance

A BILL ENTITLED

1 AN ORDINANCE concerning

2 **Child Health – Equitable Access to Health Services in City Schools**

3 FOR the purpose of addressing disparities in child health care by expanding access to
4 comprehensive health services for children across Baltimore City, including well-child
5 preventive care and vaccines, family planning services, and dental services; providing for a
6 referral to a vision or mental and behavioral health specialist at the written request of a
7 specified individual; requiring, without prior approval, mandatory follow-up care for any
8 positive or abnormal health screening; defining certain terms; generally relating to expanding
9 access to health care for City students in school health centers and health suites; and
10 providing for a special effective date.

11 BY adding

12 Article - Health

13 Sections § 6-101 to § 6-104 and the new subtitle designation,

14 “Subtitle 6. City Schools”

15 Baltimore City Revised Code

16 (Edition 2000)

17 **SECTION 1. BE IT ORDAINED BY THE MAYOR AND CITY COUNCIL OF BALTIMORE,** That the
18 Laws of Baltimore City read as follows:

EXPLANATION: CAPITALS indicate matter added to existing law.
[Brackets] indicate matter deleted from existing law.

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Baltimore City Revised Code

Article – Health

Title 3. Health Facilities

SUBTITLE 6. CITY SCHOOLS

§ 6-101. DEFINITIONS.

(A) IN THIS SUBTITLE, THE FOLLOWING TERMS HAVE THE MEANINGS INDICATED.

(B) *ABNORMAL EPSDT SCREENING*.

“ABNORMAL EPSDT SCREENING” MEANS A MEDICAL SCREENING DONE AS PART OF AN EPSDT REGIMEN THAT PRODUCES:

(1) INCONCLUSIVE RESULTS;

(2) AMBIGUOUS RESULTS; OR

(3) RESULTS THAT REQUIRE FURTHER TESTING.

(C) *BALTIMORE CITY PUBLIC SCHOOL SYSTEM*.

“BALTIMORE CITY PUBLIC SCHOOL SYSTEM” OR “BCPSS” MEANS THE PUBLIC SCHOOL DISTRICT OF THE CITY OF BALTIMORE.

(D) *EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT*.

“EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT” OR “EPSDT” MEANS THE PROVISION OF PREVENTIVE HEALTH CARE UNDER 42 CFR SUBPART B {“EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND TREATMENT (EPSDT) OF INDIVIDUALS UNDER AGE 21”}, INCLUDING MEDICAL AND DENTAL SERVICES TO ASSESS GROWTH AND DEVELOPMENT AND TO DETECT AND TREAT HEALTH PROBLEMS IN MEDICAID BENEFICIARIES UNDER 21 YEARS OLD.

(E) *FAMILY PLANNING*.

“FAMILY PLANING” MEANS PROVIDING INDIVIDUALS WITH THE INFORMATION AND MEANS TO PREVENT AN UNWANTED PREGNANCY AND TO MAINTAIN REPRODUCTIVE HEALTH.

(F) *FOLLOW-UP CARE*.

“FOLLOW-UP CARE” MEANS:

(1) ANY TREATMENT OR PRACTICE RECOMMENDED AS MEDICALLY NECESSARY TO ADDRESS ABNORMAL OR POSITIVE RESULTS OF AN EPSDT SCREENING BY A LICENSED HEALTHCARE PROFESSIONAL; AND

(2) THE PROCESS OF:

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(I) ASCERTAINING IF THE RECOMMENDED SERVICES HAVE BEEN OBTAINED; AND

(II) EVALUATING THE PATIENT'S HEALTH OUTCOME TO DETERMINE IF ADDITIONAL SERVICES ARE NECESSARY.

(G) *MARYLAND HEALTHY KIDS PREVENTIVE HEALTH SCHEDULE.*

“MARYLAND HEALTHY KIDS PREVENTIVE HEALTH SCHEDULE” MEANS THE SCHEDULE SET BY THE STATE DEPARTMENT OF HEALTH'S HEALTHY KIDS PROGRAM AS A MINIMUM EPSDT PRACTICE FOR ALL MARYLAND MEDICAID RECIPIENTS UNDER 21 YEARS OF AGE, CONSISTING OF:

(1) STANDARD HEALTH SCREENINGS;

(2) PHYSICAL EXAMS;

(3) LABORATORY TESTS;

(4) IMMUNIZATIONS; AND

(5) HEALTH EDUCATION.

(H) *MEDICALLY NECESSARY.*

“MEDICALLY NECESSARY” MEANS THAT A HEALTH SERVICE IS:

(1) DIRECTLY RELATED TO DIAGNOSTIC, PREVENTIVE, CURATIVE, PALLIATIVE, REHABILITATIVE, OR AMELIORATIVE TREATMENT OF AN ILLNESS, INJURY, DISABILITY, OR HEALTH CONDITION;

(2) CONSISTENT WITH CURRENTLY ACCEPTED STANDARDS OF GOOD MEDICAL PRACTICE;

(3) THE MOST COST EFFICIENT SERVICE THAT CAN BE PROVIDED WITHOUT SACRIFICING EFFECTIVENESS OR ACCESS TO CARE; AND

(4) NOT PRIMARILY FOR THE CONVENIENCE OF THE CONSUMER, FAMILY, OR PROVIDER.

(I) *POSITIVE EPSDT SCREENING.*

“POSITIVE EPSDT SCREENING” MEANS A MEDICAL SCREENING CONDUCTED BY A LICENSED HEALTH PROFESSIONAL AS PART OF AN EPSDT REGIMEN THAT PRODUCES POSITIVE RESULTS INDICATING THE PRESENCE OF THE TESTED-FOR CONDITION.

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1 (J) *PREVENTIVE HEALTH SERVICES.*

2 “PREVENTIVE HEALTH SERVICES” MEANS PROACTIVE CARE TO DETECT POTENTIAL
3 HEALTH PROBLEMS AND PROTECT AND MAINTAIN A PATIENT’S CURRENT HEALTH,
4 INCLUDING:

5 (1) SCREENINGS FOR HEALTH CONDITIONS;

6 (2) COUNSELING FOR CHRONIC CONDITIONS;

7 (3) REGULAR HEALTH CHECKUPS; AND

8 (4) IMMUNIZATIONS.

9 (K) *PRIMARY HEALTH SERVICES.*

10 “PRIMARY HEALTH SERVICES” MEANS A BASIC LEVEL OF HEALTH CARE, INCLUDING
11 DIAGNOSTIC, TREATMENT, CONSULTATIVE, REFERRAL, AND PREVENTIVE HEALTH
12 SERVICES, GENERALLY RENDERED BY 1 OR MORE:

13 (1) GENERAL PRACTITIONERS;

14 (2) FAMILY PRACTITIONERS;

15 (3) INTERNISTS;

16 (4) OBSTETRICIANS;

17 (5) GYNECOLOGISTS;

18 (6) PEDIATRICIANS;

19 (7) PHYSICIAN ASSISTANTS; AND

20 (8) NURSE PRACTITIONERS.

21 (L) *PUBLIC SCHOOL EMPLOYEE.*

22 “PUBLIC SCHOOL EMPLOYEE” MEANS AN EMPLOYEE OF THE BALTIMORE CITY PUBLIC
23 SCHOOL SYSTEM INCLUDED WITHIN THE DEFINITION OF “PUBLIC SCHOOL EMPLOYEE”
24 CONTAINED IN § 6-401(E)(1) OF THE STATE EDUCATION ARTICLE.

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(M) *SCHOOL-BASED HEALTH CENTER.*

“SCHOOL-BASED HEALTH CENTER” MEANS A FACILITY PROVIDING MEDICAL CARE THAT:

(1) IS LOCATED ON THE GROUNDS OF A BCPSS FACILITY;

(2) PROVIDES ON-SITE PRIMARY AND PREVENTIVE HEALTH CARE, REFERRALS, AND FOLLOW-UP SERVICES;

(3) MAY PROVIDE ON-SITE DENTAL CARE OR BEHAVIORAL HEALTH CARE, REFERRALS, AND FOLLOW-UP SERVICES; AND

(4) HAS BEEN APPROVED BY THE MARYLAND DEPARTMENT OF HEALTH.

(N) *SCHOOL HEALTH PARTNER.*

“SCHOOL HEALTH PARTNER” MEANS ANY HEALTH CARE PROVIDER OR ORGANIZATION OPERATING UNDER A CONTRACT WITH BCPSS OR THE BALTIMORE CITY HEALTH DEPARTMENT TO PROVIDE MEDICAL SUPPORT TO BCPSS STUDENTS.

(O) *SCHOOL HEALTH SERVICES PROFESSIONAL.*

“SCHOOL HEALTH SERVICES PROFESSIONAL” OR “SCHOOL HEALTH PROFESSIONAL” MEANS A PHYSICIAN, CERTIFIED NURSE PRACTITIONER, OR REGISTERED NURSE WITH EXPERIENCE, SPECIAL TRAINING, OR BOTH IN WORKING WITH CHILDREN AND FAMILIES IN COMMUNITY OR SCHOOL HEALTH PROGRAMS AND PRACTICES IN ACCORDANCE WITH THE CURRENT STATE MEDICAL AND NURSING STANDARDS OF CARE.

(P) *SCHOOL HEALTH SUITE.*

“SCHOOL HEALTH SUITE” MEANS AN OFFICE IN A BCPSS FACILITY FOR A SCHOOL HEALTH PROFESSIONAL TO PROVIDE BASIC HEALTH SERVICES AND EDUCATION TO THE STUDENTS OF THE SCHOOL, WITHOUT THE FULL CAPACITY FOR TREATMENT OF A SCHOOL-BASED HEALTH CENTER.

§ 6-102. CHILD HEALTH EQUITY SERVICES.

(A) *IN GENERAL.*

THE FOLLOWING HEALTH SERVICES SHALL BE PROVIDED AT ANY SCHOOL HEALTH SUITE OR SCHOOL-BASED HEALTH CENTER:

(1) COMPREHENSIVE PREVENTIVE AND PRIMARY HEALTH SERVICES, INCLUDING ADMINISTRATION OF VACCINES ACCORDING TO THE MARYLAND HEALTHY KIDS PREVENTATIVE HEALTH SCHEDULE;

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(2) ACCESS TO FAMILY PLANNING, DENTAL, AND MENTAL HEALTH SERVICES; AND

(3) ACCESS TO VISION CARE AT THE WRITTEN REQUEST OF A CHILD’S GUARDIAN,
SCHOOL PROFESSIONAL, OR SCHOOL HEALTH PROFESSIONAL.

(B) *PROVIDER REQUIREMENTS.*

THE LISTED SERVICES SHALL BE PROVIDED BY A PROVIDER CERTIFIED TO PERFORM EPSDT
SERVICES OR SCHOOL HEALTH PRACTITIONERS AT A SCHOOL HEALTH SUITE OR SCHOOL-
BASED HEALTH CENTER.

§ 6-103. MANDATORY FOLLOW-UP CARE.

(A) *IN GENERAL.*

FOR ANY POSITIVE OR ABNORMAL EPSDT SCREENING, ANY NECESSARY FOLLOW-UP CARE
SHALL BE PERFORMED BY A SCHOOL HEALTH PARTNER WITHOUT REQUIRING PRIOR
APPROVAL FROM:

(1) THE STUDENT’S PRIMARY CARE PROVIDER; OR

(2) A SCHOOL HEALTH PROFESSIONAL WORKING AT A:

(I) SCHOOL HEALTH SUITE; OR

(II) SCHOOL-BASED HEALTH CENTER.

(B) *ADDITIONAL SCREENING.*

AT THE REQUEST OF A PUBLIC SCHOOL EMPLOYEE OR SCHOOL HEALTH SERVICES
PROVIDER, A SCHOOL HEALTH PARTNER SHALL PERFORM AN ADDITIONAL SCREENING OR
STUDENT HEALTH CHECK-UP WITHOUT REQUIRING PRIOR APPROVAL FROM:

(1) THE STUDENT’S PRIMARY CARE PROVIDER; OR

(2) A SCHOOL HEALTH PROFESSIONAL WORKING AT A:

(I) SCHOOL HEALTH SUITE; OR

(II) SCHOOL-BASED HEALTH CENTER.

§ 6-104. RULES AND REGULATIONS.

SUBJECT TO TITLE 4 {“ADMINISTRATIVE PROCEDURE ACT – REGULATIONS”} OF THE CITY
GENERAL PROVISIONS ARTICLE, THE COMMISSIONER OF THE BALTIMORE CITY DEPARTMENT
OF HEALTH IS EMPOWERED TO ADOPT AND PROMULGATE REASONABLE RULES AND
REGULATIONS FOR THE IMPLEMENTATION OF THIS SUBTITLE.

SECTION 2. AND BE IT FURTHER ORDAINED, That this Ordinance takes effect on August 25,
2025.