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July 2, 2025

MEMORANDUM

TO:	Prince George's County Planning Board (future separate meeting) Prince George's County Planning, Housing, and Economic Development Committee
FROM:	Natalia Gomez, AICP, Planner IV Shaquan Smith, PMP, Planner IV
VIA:	Lakisha Hull, AICP, LEED AP BD+C, Planning Director
SUBJECT:	CB-27-2025 (DR-2A)

Background

The purpose of this memorandum is to offer the Planning Department's comments on the proposed CB-27-2025 (DR-2A):

AN ORDINANCE CONCERNING USE REGULATIONS - PRESERVING ACCESS TO OPIOID TREATMENT SERVICES for the purpose of defining opioid treatment centers as a new principal use type; establish the zones in which this new use type is permitted, as shown on the principal use tables; setting forth conditions under which this new principal use may be approved; and establishing off-street parking requirements for this new use type.

The Prince George's County Planning, Housing, and Economic Development Committee (PHED) met on June 5, 2025 to discuss CB-27-2025. Pursuant to Section 27-3501 of the Prince George's County Code, the Planning Department will present the proposed substantial changes and amendments to CB-27-2025 (DR-2A) to the Planning Board for an official recommendation as part of the land use and zoning legislative process. To ensure compliance with the legislative process, the noticing procedures outlined in the Planning Board's Rules of Procedure will be followed for this item to be considered by the Planning Board. CB-27-2025 (DR-2A) is scheduled to be presented at PHED on July 3, 2025. The Planning Department will include the official memorandum as part of the transmittal with the official Planning Board's recommendation on the substantial changes in CB-27-2025 (DR-2A).



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Upon receipt of the updated draft bill DR-2A, the Planning Department conducted research to determine how to proceed, ensuring that this request includes preliminary information to support the proposed amendments for all drug and alcohol treatment uses to be treated equally (i.e., see Page 2, Line 25 of DR-2A). The research included reviewing regulations and standards for Maryland Counties, local plan consistencies, and nationwide trends on this topic, as well as relevant case law. Additionally, to ensure that public health and land use are at the forefront to support future policy and legislative updates, a Health Atlas Study is proposed for Fiscal Year 2026, in cooperation with the Health Department. CR-54-2025 (Health Atlas Study) will enable a more comprehensive analysis of strategies for improved planning of public health and land use throughout the County. The Study will support the future creation of zoning legislation and ensure compliance with the adopted Sector and Master Plans, as well as indicators from Plan 2035, the County's Adopted General Plan.

To support the time-sensitive nature of CR-54-2025 (DR-2A), the Planning Department has included in this memorandum quick examples of other jurisdictions and maps that show potential locations for State-Licensed Medical Clinics, which would be a new use and definition added to the Prince George's County Zoning Ordinance. The State-Licensed Medical Clinics operate similarly to other medical practices and are commonly regarded as standard medical services. A review of peer jurisdictions discussed later in this memorandum indicates that nearby jurisdictions typically integrate these treatment centers with other medical uses. Furthermore, Plan 2035, along with Sector and Master Plans, emphasizes the importance of improving access to healthcare services (see Table 1) and addresses the need for better access, as highlighted by the Prince George's County Health Department in their memo dated June 2, 2025.

Prince George's County General, Master, and Sector Plans Alignment

The <u>Needs Assessment Report for Opioid Treatment Programs in Maryland</u> found that, among Maryland counties, Prince George's County had the second-largest gap in the capacity to provide needed treatment services, serving an estimated 6% of the 4,800 residents in need. The gap in access for opioid treatments showcases the need for the County to better align with its approved health care policies and strategies. <u>Table 1</u> lists several approved Prince George's County general, master, and sector plans that recommend expanding health care access equitably, including, but not limited to:

Plan Page Policy Recommendation	Plan	Page	Policy	Recommendation
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<u>1994 Approved Master Plan</u> <u>for Bladensburg-New</u> <u>Carrollton and Vicinity</u> (Planning Area 69)	150	Health Services Goal 1	To provide comprehensive health care services to Planning Area 69 residents as needed.
	152	Health Services Guideline 4	Development of private sector health care facilities and services should be encouraged to meet the Planning Area's health care needs.
2009 Approved Marlboro Pike Sector Plan	36	Priority Area 5: Health and Wellness Center Vision	Health and wellness services are lacking throughout this portion of the county, and the community voiced the desire for better access to health and wellness services.
2014 Plan Prince George's 2035 Approved General Plan (Plan 2035)	227	Healthy Communities Policy 4: HC 4.1	Work with the Department of Health, the Maryland State Community Health Resources Commission, and Maryland Department of Health and Mental Hygiene to evaluate, leverage, and replicate the achievements of the HEZs in the County.
2017 Approved East Riverdale-Beacon Heights Sector Plan	173	Healthy Communities Policy HC 5: HC 5.3	Work with property owners to identify potential leasable space in new development for healthcare providers.
2018 Approved Greater Cheverly Sector Plan	79	Healthy Communities Policy HC 3	Improve access to health care.
2022 Approved Adelphi Road-UMGC-UMD Purple Line Station Area Sector Plan	113	Healthy Communities Policy HC 1: HC 1.3	Attract fitness, health care, or other wellness tenants to nonresidential spaces in the sector plan area.



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Peer Jurisdiction Review

Attachment A provides a breakdown of the use categories and zones where opioid or similar treatment centers are allowed to operate in various jurisdictions throughout the region. As illustrated, these treatment centers are integrated with other medical uses, rather than being segregated. Facilities co-located with other medical and social services provide equitable access to health care for vulnerable frontline communities and reduce travel needs. They accommodate facilities or offices where patients receive examination and treatment from one or more physicians or health practitioners on a short-term basis. In general practice, these uses are permitted in commercial, mixed-use, and industrial zones, while they are typically restricted in residential zones or conditioned under special exception.

Maps

<u>Attachment B</u> presents two maps outlining potential locations for State-Licensed Medical Clinics, organized per Councilmanic District. Map 1 indicates the proposed sites within the following zones: CS, CGO, IE, IH, TAC Edge, LTO Edge, RTO-L Edge, and RTO-H Edge. Meanwhile, Map 2 identifies potential locations in the same zones, including CN, NAC, TAC Core, LTO Core, RTO-L Core, and RTO-H Core. Map 2 illustrates a more even distribution of clinics across the County when compared to Map 1.

Proposed Amendment(s)

1. Zoning Expansion

<u>On Page 6, Line 1</u> - Table 27-5101 (d) Principal Use Table for Nonresidential, Transit-Oriented/Activity Center, and Other 2 Base Zones), permit by right the proposed use in CN, NAC, TAC Core, LTO Core, RTO-L Core and RTO-H Core.

Justification: Per a memorandum dated June 2, 2025, by the Prince George's County Health Department (PGCHD), the Planning Department recommends placing these facilities within proximity to public transportation. Draft 2A, as proposed, excludes these facilities from Core areas despite their need for proximity to public transit, as recommended by the Pew Charitable Trusts' <u>Overview of Opioid Treatment Program</u> <u>Regulations by State</u>. These facilities should be permitted in all Nonresidential and Transit-Oriented/Activity Center Base Zones. Expanding facilities beyond edge transitoriented areas could balance accessibility with regulatory oversight and align with recommendations provided by the Community Planning Division Staff and PGCHD.

2. Separation Distance Measurement

<u>**Page 9, Line 6**</u>- update to provide the exact measurement from the boundary of the property with the proposed language: The use shall be located at least five hundred (500) feet from the boundary of the property used for a State-licensed medical clinic along the



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<u>nearest usual pedestrian route</u> from any Rural and Agricultural or Residential base zone or land proposed to be used for residential purposes on an approved Basic Plan for the LCD Zone or PD Zone, approved 8 detailed site plan, APPROVED SPECIAL EXCEPTION SITE PLAN, or property associated 9 with any of the following: school, library, park, playground, or recreational facility.

Justification: The Zoning Ordinance specifies that measurements must begin at the property boundary—typically the lot line—rather than at more accessible points such as the property's front door or main entrance. This distinction ensures that all measurements are consistently based on the officially recognized property limits, which may affect how pedestrian access and related zoning requirements are interpreted and enforced.

3. By-Right versus Discretionary Process

<u>**Page 9, Line 9**</u> - states a 'special exception' process. The Planning Department will defer to the County Council to determine if any of the State-Licensed Medical Clinics would be eligible for by-right, i.e., proceed to permitting.

Justification: Peer jurisdictions have State-Licensed Medical Clinics to proceed to permitting, based on certain eligible zoning districts. The Health Atlas would allow for more time to evaluate a process with a more thorough analysis of a by-right process, incorporating performance standards and criteria.

4. Clarify Parking Standards

<u>Page 11, Line 2</u> - Table 27-6305(a) Minimum Number of Off-Street Parking Spaces, needs to be updated

Justification: It is recommended to provide more clarification on the methodology for adding parking standards for single-family dwellings listed in the last two columns of Table 27-6305(a). Unless facilities are permitted through Special Exemptions, as previously stated, such use is currently prohibited in all Rural, Agricultural, and Residential Base Zones. Additional clarification is needed to determine the necessity and scope of such standards.

Lastly, the Department recommends that the bill sponsor update the bill name in Legistar, which still indicates that the bill's purpose is to preserve access to opioid treatment services rather than supporting MODERNIZING ACCESS TO TREATMENT SERVICES.



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Conclusion

In conclusion, a comparable land use and zoning approach as peer jurisdictions is recommended for the proposed bill process to proceed as by-right.

As always, the Planning Department is happy to assist with any questions or revisions the Committee may wish to discuss as this request proceeds to the Planning Board for consideration.

Attachment A: County Comparisons

County	Definition/Notes	Zoning
Anne Arundel County	"State-licensed medical clinic" means an outpatient medical clinic licensed by the State of Maryland as a detoxification facility or a substance abuse treatment program under Title 8, Subtitle 4 of the Health-General Article including programs exempt from licensing requirements under § 8-403(c)(1) of the Health-General Article of the State Code. The term does not include a medical clinic located on property owned or leased by the County or the State, or an Early Intervention Level 0.5 program as described in COMAR 10.47.02.03.	 Conditional use in Commercial, Industrial, and Mixed Use, except mixed residential. Not allowed in residential. Conditions: § 18-10-166. State-licensed medical clinics. A state-licensed medical clinic shall comply with all of the following requirements: 1. The facility may not be located within 1,000 feet of a dwelling or school, or within one mile of another State-licensed medical clinic, a plasma center, a licensed dispensary of cannabis, or a transitional housing facility. 2. Vehicular access shall be located on an arterial road or higher classification. 3. Access to the facility from the road shall be provided and the facility may not draw vehicular traffic through local roads in surrounding residential areas. 4. The clinic shall conspicuously post "no loitering" signs in all parking areas.
Baltimore County	 § 4C-101. Definitions. As used in this article, the following terms shall have the meanings indicated: State-Licensed Medical Clinic A. A freestanding ambulatory-care facility licensed under Title 19, Subtitle 3B, of the Health-General Article of the Annotated Code of Maryland, except a kidney dialysis center. [Bill No. 14-2015] B. A detoxification facility certified under Title 8, Subtitle 4, of the Health-General Article of the Annotated Code of Maryland; or C. An alcohol abuse and drug abuse treatment program certified under Title 8, Subtitle 4, of the Health-General Article of the Annotated Code of Maryland; or 	 § 4C-102. Location of state-licensed medical clinics; conditions. A. B.R., B.M., B.L., B.L.R., O.T., OR-1, OR-2 and O-3 Zones. Subject to the requirements of Paragraph 2, a state-licensed medical clinic is permitted in the B.R., B.M., B.L., B.L.R., O.T., OR-1, OR-2 and O-3 Zones of the County by special exception. In addition to the requirements of Section 502, a state-licensed medical clinic permitted by special exception under Paragraph 1 is subject to the following conditions: A state-licensed medical clinic may not be located within 750 feet of any residentially-zoned property line. Off-street parking shall be provided in accordance with Section 409. The number of spaces shall be sufficient to accommodate all employees and patients of the clinic, as determined by the Zoning Commissioner based upon information filed with the Department of Health and Mental Hygiene concerning the number of patients served by the clinic on a daily basis. B. M.R., M.L.R., M.L. and M.H. Zones. A state-licensed medical clinic is permitted in the M.R., M.L.R., M.L. AND M.H. Zones of the County as a matter of right. Off-street parking shall be provided in accordance with Section 409.

Baltimore City		 Industrial – Permitted Commercial- some permitted, some Conditional Use by Board Office-Residential - Permitted (2022) TOD - Permitted (2022) Hospital - Permitted (2022)
Calvert County	Medical Office or Clinic An establishment used by members of licensed health care and medical professions to provide diagnosis and treatment to the general public without overnight accommodation and with ancillary uses or may include reception areas, administrative offices, consultation rooms, x-ray and minor operating rooms, and a dispensary, providing that all such uses have access only from the interior of the building or structure. Examples of such professions include dentists, chiropractors, osteopaths, physicians, and occupational therapists. This definition does not include personal services, such as licensed massage therapists.	Prohibited in residential, permitted all other zones.
Carroll County	Lumped in-patient and outpatient together: <u>https://www.carrollcountymd.gov/media/sidlp1ew/ordno-2023-10-recorded-ch-158-zoning-drug-treatment-facilities.pdf</u>	 Conditional in agricultural, industrial and some commercial. Permitted in some commercial. Prohibited in residential.
Charles County	https://ecode360.com/attachment/CH0836/CH0836- 297a%20Fig%20IV1%20Table%20of%20Permissible%2 0Uses.pdf	

Howard County	 Day Treatment or Care Facility: A nonresidential facility which is licensed or certified by the State of Maryland to provide service including supervision, personal care, training or sheltered employment, during part of a 24 period, on a regular schedule, for two or more individuals in need of such services due to a medical handicap, physical or mental disability, advanced age, or addiction to drugs or alcohol. This term shall not include a child day care center, school, medical clinic or residential care facility as defined in these Regulations -OR- Ambulatory Health Care Facilities includes, but is not limited to, health maintenance organizations, out-patient clinics, diagnostic centers, ambulatory surgical facilities, physician offices, public health clinics, or community mental health centers. (Staff stated that day treatment is more like full day therapy, and a health care facility is where you would get detox/recovery drugs from) 	 Uses Permitted as a Matter of Right SECTION 113.2: - R-SI (Residential: Senior—Institutional) District SECTION 115.0: - POR (Planned Office Research) District SECTION 115.0: - PEC (Planned Employment Center) District SECTION 117.3: - OT (Office Transition) District SECTION 117.4: - CCT (Community Center Transition) District SECTION 118.0: - B-1 (Business: Local) District SECTION 118.0: - B-2 (Business: General) District SECTION 120.0: - SC (Shopping Center) District SECTION 120.0: - SC (Shopping Center) District SECTION 120.0: - SC (Corridor Employment) District SECTION 126.0: - PGCC (Planned Golf Course Community) District SECTION 127.2: - CE (Corridor Employment) District SECTION 127.5: - CAC (Corridor Activity Center) District SECTION 127.6: - TNC (Traditional Neighborhood Center) Overlay District SECTION 131.0: - Conditional Uses A. Statement of Legislative Intent Conditional Uses are authorized in specified zoning districts based on the presumption that they are generally appropriate and compatible in the specified districts. However, particular uses in particular locations may have characteristics or impacts that are not typical. Conditional Uses are not permitted automatically but are subject to the regulations of this section and the conditional Use. Zones: RC, RR, R-ED, R-20, R-12, R-SC, R-SA-8, R-H-ED, R-A-15, R-APT, HO, HC
Montgomery County	Does not explicitly reference substance abuse treatment centers, but would be considered a "Clinic (Up to 4 Medical Practitioners) or (More than 4 Medical Practitioners)". §3.5.7.A. Clinic (Up to 4 Medical Practitioners), §3.5.7.B Clinic (More than 4 Medical Practitioners) A building occupied by more than 4 medical practitioners and related services to provide health care on an outpatient basis.	Limited in residential with the primary limitation that the facility be less than 5% the floor area of a Residential Care Facility (senior or disabled housing), Charitable Institution, Day Care Center (over 30 people), Education Institution Private, or Religious Assembly. Limited/Conditional in residential on larger properties that can accommodate larger setbacks and screening than normally required in the zones: R-200, R-90, R-60. Permitted by right in commercial, mixed use, employment, industrial https://www.montgomerycountymd.gov/DPS/Resources/Files/ZSPE/UseTable.pdf

St. Mary's County	Outpatient Care Center "Licensed facility with medical staff primarily engaged in providing primary care and general or specialized outpatient care, including family planning, mental health, physical therapy, substance abuse, and kidney dialysis centers or clinics. No overnight patient or dormitory facilities shall be allowed. This classification includes HMO medical centers, freestanding ambulatory surgical and emergency centers (except hospitals), where surgical services are provided on an outpatient basis, and medical and diagnostic laboratories providing analytic or diagnostic services to the medical profession or to the patient on referral from a health practitioner"	Permitted in mixed use, commercial, industrial, town center: RNC, RMX, VMX, TMX, DMX, CMX, CC, I, OBP Limited in residential (seems equal to special exception)
Fairfax Co., VA	Considered Office Building if only outpatient.	Generally permitted in commercial and industrial (subject to planning docs), special exception in residential.
Arlington Co., VA	 Does not explicitly reference substance abuse treatment centers, but would be considered a "Social Service Institution". ACZO §12.2.4.J. Social service institutions 1. Characteristics Uses that primarily provide treatment of those with psychiatric, alcohol, or drug problems, and transient housing or shelters related to social service programs. 2. Examples Examples of social service institutions include alternative- or post-incarceration facilities; counseling, occupational therapy services; exclusive care and treatment for psychiatric, alcohol, or drug problems, where patients are residents; halfway houses; neighborhood resource centers; rehabilitative clinics; rescue missions; social service facilities, including soup kitchens, transient lodging or shelter for the homeless; and treatment centers. 3. Accessory uses Accessory uses include adult educational facility; ancillary indoor storage; associated office; on-site child care, schools, or facilities where children are cared for while parents or guardians are occupied on the premises, but not on a daily	 Social Service Institution uses are permitted in the ACZO as follows: Require approval by the County Board via a special exception use permit process wherever they are authorized. Allowed in most zoning districts, if they are not "of a corrective nature. Allowed in the S-3A and P-S zoning districts if they are "of a corrective nature." Prohibited in the Special Development (S-D), one Multiple-family Dwelling (RA-7-16), Hotel (RA-H), and Commercial Townhouse (C-TH) zoning districts.

	 basis; food services and dining area; meeting room; parking; and staff residences located on-site. 4. Uses not included Assisted living facility (see Group Living); cemetery, columbarium, mausoleum, memorial park (see Parks and Open Areas); schools (see Schools); philanthropic institution (see Community Service); Retirement living facility with individual self-contained dwelling units (see Household Living).	
Alexandria Co., VA	<20,000 sq feet Health profession office; >20,000 sq feet Medical facility	Health Profession Office is permitted in commercial and industrial areas, and SE in residential. Medical Facility is prohibited in residential, SE in light commercial, and permitted in dense commercial and industrial.
Washington, DC	 Does not distinguish between the type of disease or treatment, but would be considered a "Medical Care" Facility. § B 201.2(o) Medical Care 1. Characteristics A use involving the on-site licensed provision of medical or mental health diagnosis, treatment, or prevention of illness or disease of humans. 2. Accessory uses These facilities may provide outpatient medical or surgical care to patients or offer overnight care; 3. Examples Examples include, but are not limited to: dentist, doctor, optician, hospitals, clinics, or medical offices. This use category also includes any facility that meets the definition for and is licensed under the District of Columbia Health Care and Community Residence Facility, Hospice and Home Care. 4. Uses not included This use category does not include uses which more typically would fall within the community-based institutional facility or emergency shelter use category. 	 Medical Care is permitted as a matter of right use in all of the following zones: Mixed Use (MU) zones, except the MU-11 zone which is the waterfront zone Neighborhood Mixed Use (NMU) zones Downtown (D) zones All the Special Purpose zones (StE, WR, SEFC, USN, CG, NHR) Industrial zones (PDR) Medical Care is prohibited in residential.