

COUNTY COUNCIL OF PRINCE GEORGE'S COUNTY, MARYLAND
2020 Legislative Session

Bill No. CB-71-2020

Chapter No. 67

Proposed and Presented by Council Members Harrison, Glaros, Streeter, Taveras, Davis,
Dernoga, Hawkins, Franklin and Anderson-Walker

Introduced by Council Members Harrison, Glaros, Streeter, Taveras, Davis,
Dernoga, Hawkins, Franklin, Anderson-Walker and Turner

Date of Introduction October 20, 2020

BILL

1 AN ACT concerning

2 Healthy Children's Meals and Beverages

3 For the purpose of providing legislative intent and findings; defining children's meal at a food
4 service facility; defining a food service facility; defining covered establishments; defining
5 default beverages; defining independent food service facilities; establishing nutrition
6 requirements for children's meals; establishing default beverages for children's meals; providing
7 for certain qualifications, enforcement and penalties as it generally relates to healthy children's
8 meals and beverages.

9 BY adding:

10 SUBTITLE 12. HEALTH.

11 Sections 12-215, 12-216, 12-217, and 12-218

12 The Prince George's County Code

13 (2019 Edition).

14 SECTION 1. BE IT ENACTED by the County Council of Prince George's County,
15 Maryland, that Sections 12-215, 12-216, 12-217, and 12-218 of the Prince George's County Code
16 be and the same are hereby added:

17 SUBTITLE 12. HEALTH.

18 **DIVISION 12. HEALTHY CHILDREN'S MEAL REQUIREMENTS.**

19 **Sec. 12-215. Legislative Purpose and Intent.**

20 It is hereby declared by the County Council of Prince George's County, Maryland that in

1 order to foster healthy environments where families live, learn, work, and play in Prince
2 George's County, it must engage in the promotion of healthy lifestyles through innovative
3 approaches. The 2017 Prince George's County Health Report found that over 30% of high
4 school students in the county were either overweight or obese, exceeding the state's prevalence
5 at 26.4%. The 2020 RAND Corporation Report to the Prince George's County Board of Health
6 found that Latino high school students have the highest rate of overweight and obesity in the
7 County. Obese children are at least twice as likely as nonobese children to become obese adults.
8 Sugar-sweetened beverages or sugary drinks are leading sources of added sugars in the American
9 diet and are associated with an increased risk of type 2 diabetes, heart disease, obesity and other
10 chronic diseases. The County Council finds that consuming such drinks, including fruit drinks
11 with added sugar, sports drinks, energy drinks, and soda pose a real health risk to children.

12 The American Heart Association recommends that children over the age of 2 have no more
13 than one 8-ounce sugary drink a week. Yet children today are consuming as much as 10 times
14 that amount with nearly two-thirds of children living in the U.S. consume at least one sugary
15 drink daily. This equates to an average of 30 gallons of sugary drinks per year. Children in low-
16 income families consume 2½ times more sugary drinks than their peers in higher-income
17 families this may be due, in part, to some of the marketing initiatives by the beverage industry.
18 People living in the U.S. consume about 34 pounds of added sugar every year just from sugary
19 drinks. Every year, 40,000 cardiovascular deaths in the U.S. are attributed to overconsumption
20 of sugary drinks.

21 The County Council finds that diet-related health conditions have serious economic costs.
22 The medical burden of obesity in the United States is approximately \$147 billion annually, or
23 almost 10 percent of all medical spending. Roughly one-half of these costs are paid through
24 Medicare and Medicaid, which means that taxpayers are responsible for much of the bill.
25 Medicare and Medicaid spending would be reduced by 8.5 percent and 11.8 percent,
26 respectively, in the absence of obesity-related spending. A 2016 study commissioned by
27 MedChi, the Maryland State Medical Society, showed that Medicaid annual spending per
28 enrollee with diabetes (\$24,387) is more than double the spending per enrollee without diabetes
29 (\$10,880).

30 In 2017, The National Association of Black County Officials passed a resolution of
31 measures in order to reduce the rising rates of chronic diseases and obesity. Nationwide,

1 American children eat 19 percent of their calories at fast food and other restaurants. Children eat
 2 almost twice as many calories when they eat a meal at a restaurant as they do when they eat at
 3 home.

4 A 2013 study that examined the nutritional quality of children’s meals sold at 18 of the
 5 most profitable fast food restaurant chains in the United States found that only three percent of
 6 the 3,494 meal combinations assessed met the expert nutrition standards for children’s meals.
 7 The beverage industry spends millions each year in targeted marketing to communities of color,
 8 such that African-American children and teens see more than twice as many television ads for
 9 sugary-drinks than their white peers, lower income neighborhoods have more outdoor ads for
 10 sugary drinks than either lower-income or higher-income white neighborhoods, and 80% of
 11 food-related ads viewed by Latino children and teens on Spanish-language TV were for sugary
 12 drinks, snacks, and candy. Many restaurants and beverage companies have taken steps to help
 13 citizens address obesity by introducing lower and no-calorie options, displaying calorie
 14 information, encouraging citizens to drink more water, removing full-calorie beverages from
 15 schools, and reducing calories from many of their products.

16 The Prince George’s County Council is the Legislative Branch of Prince George’s County
 17 Government and sits as the Board of Health to govern and guide County health policy. The
 18 County Council as the Board of Health is authorized to develop solutions to public health issues
 19 that can manifest in the form of legislation or policies promulgated by the County Council for the
 20 protection and promotion of public health.

21 The purpose of this statute is to support parents’ efforts to feed their children healthfully by
 22 ensuring healthy meals are readily available to children in restaurants and that offering healthier
 23 children’s meals will improve the overall health and well-being of children and families living in
 24 Prince George’s County.

25 **Sec. 12-216. Definitions.**

26 (a) **Child Friendly Restaurant** means any Covered Food Service Facility offering
 27 Healthy Children’s Meals.

28 (b) (1) **Children’s Meal** means a combination of food items and beverage that is:

29 (A) prepared by and offered for purchase at a food service facility as a unit at
 30 a single price; and

31 (B) represented to be or otherwise primarily intended for consumption by a

1 child.

2 (2) It shall not include a combination of food items that has been prepackaged by
 3 or at a facility other than the food service facility offering the prepackaged combination for
 4 purchase.

5 (c) **Covered Food Service Facility** means any food service facility as defined by
 6 Section 12-104(a)(7) of the County Code.

7 (d) **Default Beverage** means the beverage automatically included as part of a children's
 8 meal, absent a specific request by the purchaser of the children's meal for an alternative
 9 beverage.

10 (e) **Default Healthy Side** means the healthiest side option available as part of a
 11 Healthy Children's Meal.

12 (f) **Healthy Children's Meal** is a Children's Meal that contains not more than: 550
 13 calories; 700 milligrams of sodium; 10 percent of calories from saturated fat; 15 grams of added
 14 sugars; and 0 grams of trans fat; that includes at least a half (1/2) cup of non-fried fruit or non-
 15 fried vegetables (excluding white potatoes, juices, condiments, and spreads) including:

16 (1) Servings in the specified amounts from at least two of the following five food
 17 groups, at least one of the two food groups must be a fruit or vegetable:

18 (A) Fruit: greater or equal to a half (1/2) cup (100% juice cannot be used as a
 19 fruit substitute);

20 (B) Vegetable: greater or equal to a half (1/2) cup;

21 (C) Non/low-fat dairy: greater or equal to one (1) cup;

22 (D) Meat or meat alternate: includes meat, poultry, seafood, eggs, legumes
 23 (beans and peas), soy products, and nuts and seeds: greater or equal to one (1) ounce.

24 (E) Whole grains: a half (1/2) serving must provide greater or equal to eight (8)
 25 grams of whole grains and meet at least one of the following:

26 (i) First ingredient a whole grain; or

27 (ii) greater or equal to fifty percent (50%) whole grains by weight of
 28 product; or

29 (iii) fifty percent 50% whole grains by weight of grains.

30 (2) Healthy Drink; where, if a children's meal includes a beverage, that beverage shall
 31 be one of the following:

1 (A) water, sparkling water, or flavored water with no added natural or artificial
2 sweeteners;

3 (B) nonfat or one percent milk or a nondairy milk alternative containing no more
4 than 130 calories per container or serving as offered for sale; or

5 (C) 100 percent fruit and/or vegetable juice or fruit and/or vegetable juice
6 combined with water or carbonated water, with no added sweeteners in a serving size of not
7 more than eight ounces.

8 **Sec. 12-217. Nutrition Requirements for Children’s Meals**

9 (a) In a multi-year tiered approach, each Covered Food Service Facility that sells
10 children’s meals shall:

11 (1) Offer the Healthy Drink as the default beverage as defined by Section 12-
12 216(f)(2) in Years 1-2 and thereafter.

13 (2) Offer the Default Healthy Side in all Children’s Meals in Years 2-3 and
14 thereafter.

15 (3) Offer at least one children’s meal that is a Healthy Children’s Meal as defined by
16 Section 12-216(f) in Years 3-4 and thereafter.

17 (4) Beginning in Year 5 and thereafter, enforcement will commence.

18 (b) Children’s Beverage Requirement

19 (1) Each Covered Food Service Facility shall make the default beverage for children's
20 meals a Healthy Drink option as defined in Section 12-216(f)(2), and the options provided there
21 shall be displayed on menu boards.

22 **Sec. 12-218. Qualifications, Enforcement and Penalties**

23 (a) Nothing in this Section prohibits a Covered Food Service Facility’s ability to sell,
24 or a customer's ability to purchase, a substitute or alternative beverage instead of the
25 default beverage offered with a children's meal, if requested by the purchaser of the
26 children's meal.

27 (b) The Health Department, in conjunction with the Department of Permits and
28 Inspections, and Enforcement shall administer and enforce this chapter. These
29 departments may issue rules and regulations as necessary to carry out the purposes of this
30 chapter consistent with existing enforcement, recordkeeping and fine structures, and the State

1 Regulations adopted in Subtitle 12, Subdivision 1 as amended by Subdivision 2 of the
2 County Code in all manner of enforcement except as provided in Subsection (d)(3)(A) of
3 this Section.

4 * * * * *

5 SECTION 3. BE IT FURTHER ENACTED that the provisions of this Act are hereby
6 declared to be severable; and, in the event that any section, subsection, paragraph, subparagraph,
7 sentence, clause, phrase, or word of this Act is declared invalid or unconstitutional by a court of
8 competent jurisdiction, such invalidity or unconstitutionality shall not affect the remaining
9 words, phrases, clauses, sentences, subparagraphs, paragraphs, subsections, or sections of this
10 Act, since the same would have been enacted without the incorporation in this Act of any such
11 invalid or unconstitutional word, phrase, clause, sentence, paragraph, subparagraph, subsection,
12 or section.

13 SECTION 4. BE IT FURTHER ENACTED that this Act shall take effect 6 months after it
14 becomes law.

Adopted this ____ day of _____, 2020.

COUNTY COUNCIL OF PRINCE
GEORGE'S COUNTY, MARYLAND

BY: _____
Todd M. Turner
Council Chair

ATTEST:

Donna J. Brown
Clerk of the Council

APPROVED:

DATE: _____ BY: _____
Angela D. Alsobrooks
County Executive

KEY:

Underscoring indicates language added to existing law.

[Brackets] indicate language deleted from existing law.

Asterisks *** indicate intervening existing Code provisions that remain unchanged.