February 12, 2020

Mr. David Ross  
Assistant Administrator  
Office of Water  
U.S. Environmental Protection Agency  
1200 Pennsylvania Ave. NW  
Mail code: 4101M  
Washington, DC 20460–0001


Dear Assistant Administrator Ross:

Healthy Babies Bright Futures (HBBF) respectfully submits these comments regarding the Environmental Protection Agency’s (EPA) proposed revisions to its Lead and Copper Rule (LCR) published in the November 13, 2019th Federal Register at 84 Fed. Reg. 61,684.

Healthy Babies Bright Futures is an alliance of scientists, nonprofit organizations and donors working to create and support initiatives that measurably reduce exposures to neurotoxic chemicals in the first thousand days of development.

We support the specific LCR revisions that genuinely strengthen public health protections, including requirements for full, public inventories of lead lines and improvements to testing and public communication provisions. But EPA’s proposal leaves significant gaps in public health protection. We recommend that EPA strengthen the LCR proposed revisions in these two key areas:

1. **Require all lead service lines (LSLs) to be completely removed in 10 years or less at utility expense.** An estimated 6 to 10 million lead service lines convey drinking water to millions of Americans and represent the nation’s top source of lead contamination in water. Removing this long-term lead source is an urgent priority. Yet EPA’s proposal guts current LSR replacement rules. It extends the timeline for LSL removal by two decades, from the current 14-year mandate (7% of lines replaced each year) to a 33-year timeline (3% per year). It also fails to consider lead sections like goosenecks and pigtails as indicative of LSLs, even though they can be major sources of lead particles in drinking water. These rollbacks would guarantee decades of continued risk for infants and young children, who are particularly vulnerable to lead’s impacts. The rollbacks also violate the Safe Drinking Water Act’s (SDWA) anti-backsliding provision, which requires that any EPA revision of drinking water regulations “maintain, or provide for greater, protection of the health of persons” (Section 1412(b)(9)).

HBBF supports removal of all lead service lines nationally. Under the proposed rules utilities can leave lead pipes in place if one of every 10 homes tested has lead levels just under the Trigger Level (10 parts per billion (ppb)). This “do nothing” loophole leaves children at risk.
The level for inaction is 10 times higher than the American Academy of Pediatrics’ recommended 1-ppb limit for children (AAP 2017). The provision would allow drinking water in many cities to flow through lead lines in perpetuity, a near guarantee of future, damaging exposures for children when changes in water sources or treatment methods unexpectedly mobilize lead and spike exposure. Children in cities like Flint, Michigan and Washington, DC have borne the consequences of this failure in federal regulation. The proposed revisions do little to remedy it. LSL replacement should be mandatory, required of every utility, and completed within 10 years.

2. **Protect bottle-fed infants and young children from lead in water, including in amounts less than the Action Level of 15 ppb that still pose significant risk to the developing brain.** HBBF supports the development of a legal limit for lead in water (Maximum Contaminant Level, MCL) no higher than 5 ppb, consistent with recent EU recommendations and Canadian regulations (European Commission 2018, Health Canada 2019). We also support strengthening the LCR revision’s provisions for public education to better protect children. Under current and proposed requirements, parents might be misled to believe that any amount of lead under the Action Level of 15 ppb is safe for children. This is not the case. The American Academy of Pediatrics’ recommended limit of 1 ppb for children is a more protective guidance level (AAP 2017). Denver Water has chosen 3 ppb as the trigger for providing free filters and replacement cartridges to households with formula-fed infants (Denver Water 2019).

HBBF’s lead-in-water testing program, conducted in partnership with Virginia Tech, finds significant numbers of homes with lead levels above EPA’s Action Level and more protective limits (HBBF 2019). Among 800 homes tested nationally, half have lead above AAP’s recommended limit of 1 ppb in at least one of three samples collected (a first draw sample and 45-second and 5-minute flush samples). One in five homes has lead in excess of Denver Water’s 3 ppb limit for bottle-fed infants. One in 8 homes has lead exceeding Canada’s legal limit of 5 ppb. One in 26 homes exceeds EPA’s Action Level of 15 ppb. These numbers point to the urgency of action to remove lead from drinking water systems and to educate families in the meantime about how to protect against lead’s harmful effects.

We support Denver Water’s provisions (Denver Water 2019) focusing on bottle-fed infants, partnering with local community groups and healthcare providers in public outreach, and providing families with free testing, filters and cartridges until all LSLs are replaced. That model, extended nationally and included in the LCR revisions, would provide significant benefits to U.S. families. Short of that, we recommend that EPA expand public education efforts to cover:

- **Bottle-fed infants (drinking formula made with tap water) as a unique “at-risk” group, in annual water quality reports and household-level water testing reports.** Their lead exposure is higher, pound-for-pound, than that of any other group.
- **The distinction between the Action Level of 15 ppb (an administrative tool) and limits recommended to protect infants and children, including the 1 ppb limit recommended by AAP for young children.**
• Point-of-use filters, as another way (beyond flushing) to reduce lead exposures, with guidance on filter types and maintenance.
• How to test water for lead, including the need for at least 2 samples in each test to identify the presence of lead in fixtures or LSLs.

We appreciate your consideration of these comments. The LCR revisions represent a significant opportunity for public health protection. We hope that EPA will strengthen what has been proposed.

Sincerely,

Jane Houlihan
Research Director

Charlotte Brody
National Director

References


