



February 1, 2024

U.S. Environmental Protection Agency
1200 Pennsylvania Avenue NW
Washington, DC 20460

Re: *EPA Docket No. EPA-HQ-OW-2022-0801 – National Primary Drinking Water Regulations: Lead and Copper Rule Improvements*

On behalf of Children's Wisconsin, I am writing regarding the Environmental Protection Agency's proposed guidance to industry regarding the proposed revised Lead & Copper Rule.

Children's Wisconsin (Children's) is the state's only independent health system dedicated solely to the health and well-being of kids. We serve children and families in every county across the state, with two inpatient hospitals and more than 30 primary, specialty and urgent care clinics. We care for every part of a child's health, from critical care at one of our hospitals, to routine check-ups in our primary care clinics. Children's focuses on all elements of pediatric well-being by providing dental care, school health nurses, foster care and adoption services, family resource centers, child health advocacy, health education, family preservation and support, mental health services, pediatric medical research and the statewide poison hotline.

Lead is a significant public health issue in our communities across the state. At Children's, we understand firsthand the effects lead poisoning can have on a child's health and well-being, including learning difficulties, developmental delays and behavioral issues. There is no "natural" level of lead that comes from our diet or nature; therefore, any detectable level of lead in a child's blood as a result of environmental contamination. When it comes to lead and children, no level can be considered "safe." Our children face so many potential threats to health and well-being during the first years of life – years that are foundational to their growth and development. Lead exposure is one threat that we have the ability to control and mitigate the risks.

As with most other health issues, systemic inequities have contributed to disparities in lead poisoning for those who are underserved or living in certain geographic areas. Lead exposure disproportionately impacts families with lower incomes and families of color. Wisconsin is ranked among the top 10 states with the highest percentages of children with elevated blood lead levels, representing approximately 3.3% of children across the state in 2020. While 1.6% of White children in Wisconsin tested had elevated blood lead levels, 6.5% of Black children tested had elevated blood lead levels. Lead poisoning rates are twice as high among American Indian children, and higher rates also exist among Asian and Hispanic children than their white counterparts. We appreciate the proposed rule improvements include significant provisions aimed at decreasing lead exposure.

At Children's, we are dedicated to providing the best care for children and we have implemented measures to increase testing to better identify children in need of care, as well as creating an integrated lead care management program to more holistically support children and families with coordinated care. We follow Wisconsin Lead Poisoning Prevention Program guidelines and recommendations for testing, including enhanced testing for children at greater risk of lead poisoning, including children covered by Medicaid and those residing in the cities of Milwaukee and Racine. We have equipped each of our Primary Care sites with point-of-care instruments so lead results can be shared with both families and the local health department and any follow-up testing and care can be initiated. In addition to comprehensive work across Children's system to close lead care gaps for our patients, we're proud to be partnering with several community organizations to implement community-based lead testing and better coordinating care with the City of Milwaukee Health Department.

Children's complies with Federal civil rights laws. We do not discriminate based on race, color, national origin, age, disability or sex. Si no habla inglés, se programarán servicios de idiomas en forma gratuita. Llame al (414) 266-7848 (TTY: 414-266-2465). Yog hais tias koj tsis txawj hais lus Askiv, peb yuav teem sij hawm muab kev pab txhais lus pub dawb rau koj. Hu rau (414) 266-7848 (TTY: 414-266-2465).

Kids deserve the **best.**

Despite our enhanced efforts, Children's continues to see children who are hospitalized for chelation therapy due to lead poisoning. This is an issue we cannot ignore; lead poisoning of children must be addressed.

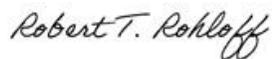
We appreciate the Administration's commitment to addressing this critical public health challenge our children face. The proposed rule includes significant provisions aimed at decreasing lead exposure. That includes a proposed requirement to replace the vast majority of lead service lines (LSLs) in our communities within 10 years by locating LSLs and creating plans to replace them. We sincerely appreciate the Agency's urgency in encouraging communities to take the threat of lead poisoning from LSLs seriously. We know water systems across Wisconsin have been working diligently to understand the scope of LSLs in their communities and replace them in an efficient and equitable manner. Including requirements for an updated public lead service line inventory and a plan to address this issue will help ensure that community members have accurate information about their home and ensure water systems are working proactively to address this important issue. We also know the private side of LSLs, not impacted by this proposed rule, continue to pose lead poisoning risks for children as well as significant financial barriers for already burdened families. Full LSL replacement, including both public and private, would be a meaningful step towards more fully mitigating the risk of poisoning from LSLs.

We encourage the Administration to ensure water systems and communities have access to the financial resources they need to achieve this ambitious goal and address the workforce and supply chain issues that may impact full realization of this provision. The Bipartisan Infrastructure Law and the American Rescue Plan Act funds were certainly helpful in supporting communities to begin to address lead poisoning prevention, however we believe the scope of this issue, with more than 150,000 LSLs across Wisconsin, requires additional investment and resources. In addition, of course we encourage continued focus and funding on efforts to reduce the other environmental sources of lead poisoning in our communities, including lead paint dust.

Another significant proposed provision includes lowering the lead action level from 15 µg/L to 10 µg/L and requiring water systems to reduce lead exposure through additional corrosion control, water filters or other measures. While we believe this level could be lower still, we believe this adjustment will help take a step towards more swiftly reducing the levels of lead in our water. We encourage water systems to provide community members with free and easy access to the information and resources they need to help mitigate the risk of lead poisoning in their children.

Eliminating the sources of lead in our community will continue to take committed and coordinated action by community, health and government entities. We appreciate local, state and federal officials looking at this as a public health issue and we encourage increasing focused efforts and resources aimed at lead poisoning prevention. Thank you for the opportunity to share comments on the proposed rule improvements.

Sincerely,



Bob Rohloff, MD
Lead Program Medical Consultant
Children's Wisconsin