Janet T. Mills Governor

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Senator Joseph Baldacci, Chair Representative Michele Meyer, Chair Members, Joint Standing Committee on Health and Human Services 100 State House Station Augusta, ME 04333-0100

Re: LD 1006 - An Act to Ensure Access to Safe Drinking Water from Household Wells in Rural Areas by Expanding Testing

Dear Senator Baldacci, Representative Meyer, and Members of the Joint Standing Committee on Health and Human Services:

This letter is to provide information about LD 1006, An Act to Ensure Access to Safe Drinking Water from Household Wells in Rural Areas by Expanding Testing, and the potential impact of the proposed legislation, if enacted.

The Maine Center of Disease Control and Prevention (Maine CDC) is neither for nor against this bill and offers the following information for your consideration.

LD 1006 adds contaminants to the Department of Health and Human Services' uniform testing recommendation for private wells. The bill requires a program to provide free testing for perfluoroalkyl and polyfluoroalkyl substances (PFAS) in household well water of low-income residents through contracts with qualified laboratories. The department is required to conduct educational outreach to make low-income residents aware of the availability of free testing of well water and eligibility for grants from the Maine State Housing Authority to pay for water treatment systems. The bill clarifies that low-income homeowners served by well water that exceeds State standards for PFAS and other contaminants are eligible for the grants.

The Department supports the concept of providing free well testing for low-income residents as a means toward identifying and reducing exposure to potential drinking water contaminants that could impact public health. The bill identifies 15 contaminants listed in 22 MRS § 2660-T that are included in the Health and Environmental Testing Laboratory's (HETL) Uniform Recommendations for Residential Private Well Testing. These include arsenic, uranium, radon, nitrate, and other contaminants with public health implications. The bill also provides for contracted services of free PFAS analysis for low-income residents with residential wells. Exposure to certain PFAS above specific levels may lead to adverse health effects.

Private wells in Maine are not regulated and there is no required testing of residential wells on a statewide basis, although some communities may have local ordinances to this effect. An estimated 560,000 residents receive their drinking water from private wells, approximately half

of Maine's population. Therefore, providing private well owners with outreach and education on this topic, as well as free testing and information about reducing exposure to contaminants, could have a significant impact on public health.

The Maine Legislature has previously enacted a mandate for the Department to provide free arsenic testing for low-income families (PL 2021 Chapter 483 Sec. BB-1). \$52,840 was allocated for each of the 2021/22 and 2022/23 budget years with the allocation from the Maine Jobs and Recovery Program. The Department has been using these funds to initiate a pilot program to provide free comprehensive well water test kits (including arsenic) to families enrolled in Maine's Women, Infant, Child (WIC) Nutrition Program and who are also enrolled in MaineCare. WIC counselors identify clients relying on private well water and inform them of the opportunity to obtain a free water test. Since November of 2022, 899 test kits have been requested through this pilot program, of which 550 have been shipped out. The return rate for shipped kits being returned to HETL for analysis is currently running 5 and 8%. The Department anticipates it will expend all the allocated funds supporting this initiative.

Attempting to implement the provisions of this bill without the additional human resources necessary to reach out to private well owners and educate them on the importance of testing their drinking water and providing assistance once laboratory results are available would fall short of the bill's intent. Please note that previous legislation that established free testing of arsenic in well water for low-income Mainers did not provide for staffing resources to establish the program and provide follow-up to encourage the return of shipped testing kits and thus far has resulted in only limited completion of free water testing. To improve and maintain this current testing initiative of low-income families, two full-time positions would be needed within the Maine CDC's Division of Environmental Health: a Public Health Educator III (PHE-III) to provide outreach and education and manage the targeted low-income testing initiatives, and an Environmental Specialist III (ES-III) to establish and maintain a contractual program for free testing of PFAS in well water of low-income families. In addition, in order to process the expected increase in samples per year at the HETL, a lab position (Chemist I) would be needed.

Funding needs for the increased analyses at the HETL for the 15 recommended parameters, as well as for the contracting of the PFAS analyses, would be significant. This cost is dependent on the definition of low income and how many will avail themselves of this testing, as well as whether multiple samples are allowed per household. In order to provide a cost estimate, it was assumed that the program would be limited to families with a household income of less than \$15,000 per year and who own a home with a well (estimated to be about 22,000 households). An assumption was then made that 50 percent of these households would avail themselves of this testing opportunity over the next 10 years, or approximately 1,100 tests per year.

Based upon information provided by the HETL, analysis of the 15 parameters found in 22 MRSA Section 2660-T as referenced in this bill would currently cost \$145 per sample. Accounting for minor periodic increases in the testing fees and some equipment replacement, this would cost approximately \$2 million in the next 10 years, or \$200,000 per year.

The Department anticipates that there would be significant interest in PFAS testing at residential wells in Maine. Based on information from the only laboratory in Maine currently accredited to

test PFAS in drinking water, a contract for PFAS testing would cost approximately \$400 per sample. Therefore, the cost of offering free PFAS analysis for low-income residents would cost approximately \$4.5 million over the next 10 years, or \$450,000 per year for the projected 1100 tests.

Thank you for your consideration of this matter. The Maine CDC is available to provide additional details for the Committee's consideration.

Respectfully,

Nancy Beardsley, Acting Director

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Maine Center for Disease Control and Prevention