DATE: March 5, 2024

SUBJECT: Statewide Drinking Water Advisory Council Meeting

Attendance:
Dan Coss
Kristin Ward
Stuart Batterman
Glen Terry
Jennifer Morse
Syliva Orduño

Wayne Jernberg (virtual, non-voting)

Lisa Anderson (EGLE)
Heather Brown (EGLE)

Meeting began: 1:01pm

The agenda included:

1. **Approval of Agenda**
   MOTION: Glen moved, seconded by Sylvia, to approve the agenda.
   Motion passed unanimously.

2. **Approval of Minutes from February 14, 2024**
   MOTION: Stuart moved, seconded by Glen, to approve the minutes.
   Motion passed unanimously.

3. **Blood lead testing legislation (Angela Medina – DHHS)**
   - Governor signed 10/03/2023
   - Public Act 145 and 146
   - Moving to a universal testing state
   - BLT regardless of insurance
   - There is an opt out option for parents/guardians
   - Rulemaking Process
     - Drafting and will share with stakeholders for comment
     - Respond or consider all comments
     - Edited version will be submitted with a public hearing on if stakeholders are in support or opposed.
   - Anticipated rule completed by late summer early fall.
   - Will updated health education materials.
   - Educating health care providers about this requirement
   - Educating community

    - Media campaign
    - Press release
    - Newsletters
    - Social media
- *Sylvia – Any economic impact? How will this be paid?*
    - Continued to be covered by Medicaid. For private insurance, Affordable Care Act should cover because it is preventive care. What should be covered isn't always covered. Working closely to have conversations on when a test is not covered.
- *Sylvia – Follow-up steps of a high result (any case management plan)?*
    - Programs already in place but will be needed to expand, more children will probably need these services. Currently when there is a high level of lead – eligible for nursing case management offered to family, meet with family at home, visual assessment of home and child and make necessary referrals to programs and Lead Safe Homes program. Do an environmental investigation and offer services.
- *Jennifer* – H*ome abatement can be difficult to get done, hopefully efforts being made to increase availability of program.* Is there work being done to accommodate availability in rural areas? *Legally, is there anything there can be done with rule process to expand it past physician ordered (expand to Physician Assistant, Nurse Practitioner, etc.)?*
    - Suggested to include that comment as part of public comment. Looking into what a physician definition includes.
- Jennifer comment – a large amount of pediatric care is done by family practitioners (should expand beyond just pediatrician)
- *Stuart question – reporting out, what does rule say about data collected – does DHHS have to report out?*
    - Data is available through mi.gov/MiTracking and do annual reporting. Higher levels those are available through reports. All blood lead test results levels are required to be reported to MDHHS, but MDHHS reports out at 3.5 µg/dL.
- *Sylvia question – how did* 3.5 µg/dL *come to be? Why not lower?*
    - It's based off the CDC and Michigan followed suite. Stuart mentioned CDC number is statistical based.
- *Sylvia question – What about immunization reports. Are high risk areas included on the immunization reports?*
    - Unsure if this will be included in the rules. 80-some areas determined by epi-analysis (age of housing, poverty rates, EBL rates to determine 84 locations). Something to look into.
- *Stuart question - MDL value or are lower numbers quantified?*
    - Jennifer mentioned with capillary testing, its not very sensitive.

Sometimes with confirmatory testing the result will be low when the capillary was high because of cleaning issues.
    - Angela mentioned this will be part of education, capillary testing is an important tool but key is the is the follow-up confirmatory veinous testing. Above 1 µg/dL will tell exact decimal place the result came back as.
    - Jennifer mentioned struggles with getting confirmatory testing and indicated focus on nutrition (levels tend to go down with improved nutrition).
- *Sylvia question - What is different about this process now to get people to get tested? How can we get better results beyond 10% going back for confirmatory testing?*
    - Jennifer noted there is now better insurance coverage through Affordable Care Act. More follow up with nurse case management. Can offer incentives like a gift card. It's a lot of work to get people to come do the blood test.
    - Angela noted that while the bill does say providers, continuing efforts to increase blood lead testing at WIC, preschools, great starts, mobile clinics, etc. where can we meet them where they are at to do the blood lead testing.
- *Sylvia question - What kind of appropriations can be tagged onto this to help address?*
    - Dan looked this up and it doesn't look to be any appropriations linked to the legislation.
- *Stuart question - Is there sunsetting on this bill?*
- *Could this council provide a recommendation?*
    - As we think about lead in water. With lead abatement land owners and their willingness to make those changes.
    - Lack of appropriations or funding. Its an equity issue and to ensure the program is effective.
    - Public comment period the council could provide a comment. Enough contactors, resources for mitigation, etc.
    - Is the report out be done by MDHHS? Could it be a combined report out by MDHHS and EGLE?
    - What is the time period for the comments?

4. Know Your Water toolkit

- Review of materials available on Michigan.gov/knowyourwater. Majority of materials are located on this website if you click on Partner Resources.
- *Sylvia comment – it's not clear the connection on the images and the message. It's not obvious.*

    - Heather mentioned that a focus of the materials is encouraging using a filter in your home instead of just opening the tap (for cooking water, etc.).
- *Sylvia question – are the graphics and flyers available for free? Can people order them?*
    - These are available for download and someone would need to order copies from a printing service or print them off.
    - GUD marketing did set the coloring so they can be printed in black and white/grayscale and it will print well.
- GUD did a lot of evaluation in developing materials. There is a report on the evaluation findings.
- *Budget for printing?*
    - No budget. That would be for the water systems and communities to print on their own.
    - The mini grants could be used for the printing of these materials.
    - Suggestion that EGLE look into additional grant opportunities.
    - Sylvia mentioned that printing materials produces a lot of paper, too much ink. Advocates come in and do the education because the water supplies are not doing the distribution of the materials.
    - Mention of QR code on materials, so that additional materials can be viewed virtually.
- Discussion on recommendations on how to get the word out on this toolkit.
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    - Municipal leagues.
- *Comment in chat from Cyndi Roper (public) – "I realize there isn't public comment along the way, but I have some questions about the content of these fact sheets. For example: 1) the health effects document doesn't mention lead service lines as a potential source, which is problematic given the charge of this body; 2) on the "how does lead get into your water" document states that fittings and fixtures after 2014 contain are okay but they contain lead - less lead than before but they still contain lead; and 3) "how does lead get into your water" doesn't mention galvanized service lines downstream or formerly downstream of lead."*
- Feedback on the landing page: suggestion to change the wording ("Partner Resources") so it's more clear where to get the materials.
- Suggestion to send a reminder to the water councils about the toolkit.

5. Discussion on Water System Advisory Council survey results

- Revisited some of the more detailed questions from the survey.
- Discussion on lead education at the household level vs community water system level. Is there a way to link relevant materials together in one location for easy access, such as MDHHS materials too.
- Discussion on creating a newsletter again.

6. **Other business**
    - Filter First. 30 day public comment period open.
    - Gud Marketing putting together an abstract for the Great Lakes Drinking Water Conference
    - Future meetings and agenda items
        - Send ideas to Heather for council meeting agenda items
        - Some suggestions of agenda items from Dan: Gud Materials and amendments; council statement on rules for Universal Testing; Newsletter.
        - Stuart brought up an agenda item of identifying priorities as a council.
    - Next meeting: April 16th at 1:00pm

7. **Public Comment**
    - No public comment

8. **Closing Remarks**
    - No additional business by council members

9. **Adjournment**

    MOTION: Glen moved, seconded by Stuart, to adjourn the meeting.
    Motion passed unanimously.

Meeting ended: 3:00pm