October 10, 2013

Michael McKibben Office of Regulations California Department of Public Health, MS 0507 P.O. Box 997377 Sacramento, CA 95899-7377

Re: DPH-11-005 (Hexavalent Chromium)

Dear Mr. McKibben,

Thank you for this opportunity to provide comment on the Department of Public Health's (DPH) proposed drinking water standard for hexavalent chromium. Our organizations, which represent hundreds of thousands of Californians, strongly oppose the 10 parts per billion (ppb) standard because it will not protect the vast majority of Californians already being exposed to this extremely toxic chemical through their drinking water.

Standard is not health protective

The California Legislature decided to regulate hexavalent chromium in drinking water because of its serious threat to human health. The Office of Environmental Health Hazard Assessment agreed. Its scientific analysis, which was peer reviewed twice, established a link between ingestion of the chemical and increased rates of stomach cancer and gastrointestinal tumors. Hexavalent chromium is also included on the Proposition 65 list as a reproductive toxicant, and it is linked to other serious health effects such as hemorrhaging and liver and kidney damage or failure. Given the serious cancer and non-cancer effects, it is unacceptable for an agency that states on its website that it is "dedicated to optimizing the health and well-being of the people in California" to propose a drinking water standard for hexavalent chromium that is 500 times higher than the Public Health Goal of .02 ppb (the exposure level over a lifetime at which no significant public health impacts would be expected). Nor is it in keeping with Health and Safety Code §116365(a), which requires CDPH to establish a standard at a level as close as feasible to the corresponding public health goal, *placing primary emphasis on the protection of public health*. The problem is exacerbated by the fact that, according to the Department's own data, this standard will ensure that more than 85% of the water sources known to contain hexavalent chromium in excess of 1 part per billion will not be treated, allowing the continued exposure of potentially 24 million Californians.

Answer is to support efforts to address contamination, no perpetuate health disparities

While DPH argues that treating the water is expensive, it fails to balance those water treatment costs with the costs borne by communities when exposed to contaminated water. The draft standard puts a disproportionate focus on treatment costs over health impacts, perpetuating a cycle of injustice which uses the excuse of costs for low income communities and those relying on small water systems to allow them to be exposed to chemicals at levels that will harm their health. The answer is not to allow dangerous levels of hexavalent chromium in drinking water, but rather to ensure that disadvantaged communities have access to funds and other necessary resources to provide safe drinking water.

On behalf of our organizations' members, we urge DPH to close the overly wide gap between the Public Health Goal and the proposed legal standard.

Sincerely,

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