

February 22nd, 2023

TO: House Capital Investment Committee

FROM: Carly Griffith, Water Program Director, Minnesota Center for Environmental Advocacy

RE: HF 24 (Jordan)

Chair Champion and Members of the Committee:

Thank you for your service to the people of Minnesota and thank you for the opportunity to testify on HF 24 (Jordan). Minnesota Center for Environmental Advocacy (MCEA) is a nonprofit organization with almost 50 years of experience using law and science to protect Minnesota's environment and the health of its people.

MCEA supports the grant program for lead service line replacement as outlined in HF 24. Childhood lead poisoning is a public health crisis that we must act quickly to address. For children under 6 years of age, lead exposure can lead to lifelong health impacts that include damage to the brain and nervous system, slowed growth and development, and behavioral problems. As a community advocate in Milwaukee, Wisconsin, I saw firsthand the impact this public health crisis has on families. I talked to mothers whose children were hospitalized for high blood lead levels, who had to tirelessly advocate for their children to get the resources they needed to deal with related cognitive and behavioral issues in school, and who then became community leaders to ensure that other children didn't have to face what their children did.

Here in Minnesota, we need to get ahead of the problem while we have the resources to do so. This grant program will allow us to tackle one of the primary sources of lead exposure in our state, which is the lead pipes that deliver drinking water to our homes. A general fund appropriation for this grant program will allow us to maximize the federal funds for lead service line replacement and ensure that we are able to meet the goal to replace all drinking water service lines in the state by 2033.

Residential lead service lines are divided into publicly and privately-owned portions, with the public side owned by municipalities and the private side owned by homeowners. One of the challenges with lead service line replacement is to coordinate funds to ensure that the public and privately-owned portions of the pipe can be replaced at the same time. Not only is it much more cost effective to replace both at the same time, but partial replacements can actually increase the risk of lead exposure and "may be linked to increased incidence of high blood levels in children."

Centers for Disease Control and Prevention. Childhood Lead Poisoning Prevention. August 18, 2021. <a href="https://www.cdc.gov/nceh/lead/resources/default.htm?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fnceh%2Flead%2Fwaterlines.htm">https://www.cdc.gov/nceh/lead/resources/default.htm?CDC\_AA\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fnceh%2Flead%2Fwaterlines.htm</a>

This bill addresses that challenge in two ways: first, it requires that at least 70% of the grant funds are used to replace privately owned portions of lead drinking water service lines. This is critical because the private side cost share is often the greatest obstacle to coordinated lead service line replacement, and this grant program will provide the necessary resources to allow for coordinated replacement at a neighborhood or census block scale. Second, the grant program prioritizes applications that identify how the recipient will coordinate the removal of the publicly and privately owned portions of the lead lines and minimize the number of lead lines that are only partially removed.

Lead contamination is an environmental justice issue that disproportionately affects lower-income families and communities of color, where decades of disinvestment have led to critical infrastructure needs, poorer health outcomes, and less economic opportunity. MCEA commends the inclusion of grant criteria to prioritize lead service line replacement for lower-income residents and those from other disadvantaged communities that are at the greatest risk for lead exposure. It also commends the requirement for applicants who serve large customers bases to incorporate workplans that maximize the participation of those from under-represented populations in the construction industry, and for all laborers and mechanics to be paid the prevailing wage rate for their work. Other opportunities for workforce development could include lead paint abatement—this would build on the lead service line replacement work and address another critical pathway for lead exposure in infants and young children.

Finally, the lead service line mapping grants included in this bill are a critical step to ensure that we have up to date inventories of drinking water service lines and can prioritize replacement in the areas of greatest need.

HF 24 contains multiple strategies that are necessary to combat the public and environmental health crisis of lead contamination, such as geospatial inventories of drinking water service lines across the state; grants that allow for the coordinated replacement of lead service lines and address obstacles for the private side cost share; and the workforce development component that will help Minnesota reinvest in the communities where this work is done.

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