Section 1 - Groundwater Protection
The Minnesota Department of Health (MDH) Health Risk Limits program promulgates health-based guidance for drinking water after a rigorous review of the toxicity and health impacts of a chemical. This review takes into account all current science related to testing a chemical, and includes a review of standards or other guidance that are developed by other states, the federal government, and governments of other countries.

This type of work changes over time, involving new researchers and modern methods of risk assessment. A limited but growing number of government entities are producing cancer assessments for chemicals of emerging concern and chemicals that the U.S. Environmental Protection Agency (EPA) has not been keeping updated with current cancer assessments. Since the statutory language enabling rulemaking limits MDH to using EPA cancer assessments, MDH has not been able to promulgate into rule all of the guidance that MDH programs develop. As a result, rules for a small but growing number of chemicals that are found in Minnesota waters have not been promulgated. The minor wording change in this section allows MDH discretion in using the most appropriate and timely data for its rules to protect the health of Minnesotans.

Section 2 – Lead Housekeeping
According to Minnesota Statutes, section 144.9501, Subd. 9, an elevated blood lead level (EBLL) is defined as “a diagnostic blood lead test of at least 10 µg/dL in any person, unless the commissioner finds that a lower concentration is necessary to protect public health.” On April 16, 2014, the Commissioner found that this definition was insufficient to protect public health. The new threshold for an EBLL is 5 µg/dL.

Changing the EBLL definition to 5 µg/dL ensures that Minnesota children are better protected from future lead exposure. New scientific evidence has shown negative mental and physical outcomes associated with blood lead concentrations less than 10 µg/dL. In fact, we now know that there is no safe level of exposure to lead. The new definition of an EBLL is consistent with the latest scientific literature and current MDH case management and clinical treatment guidelines. The new definition is also consistent with the current CDC “reference level” for lead.

This housekeeping statute change, recommended by the Revisor's Office, inserts the new EBLL value in statute text rather than relying solely on the April 16, 2014 Commissioner’s finding document for the updated definition of an EBLL.