

HB23-1058: Child-occupied Facility Lead-based Paint Abatement

Hearing: March 2, 2023 1:30 PM

Author: Catherine Gilligan MD

Position: in support

Dear Chair of the Health and Human Services Committee and committee members,

I am writing this testimony in support of HB23-1058 as a citizen of Denver and as a family medicine physician who works in a primary care medical practice.

I'd like to start with a story of a 4-year-old girl who I took care of while in medical school. This little girl was brought to the clinic by her mom, who had become concerned about her increased pickiness with food, seemingly nonexistent appetite, and weight loss. On a developmental questionnaire, this patient was also falling behind on milestones with speech and social skills. A blood lead level was tested and found to be five times the upper limit of normal. Lead toxicity was the cause of her symptoms and delays and she was likely exposed at her daycare. While she thankfully got the treatment she needed, she went on to require months of speech and occupational therapy to catch up with her peers.

This little girl's story is unfortunately not uncommon. As a family medicine physician, I take care of patients of all ages. My job is to help treat and prevent disease. For kids particularly, prevention of disease can largely happen in the places they spend the most time - their homes, schools, and childcare facilities.

A 2021 national study found that children using public insurance (Medicaid, CHIP) were significantly more likely to have elevated blood lead levels compared to their counterparts. In Colorado specifically, 72% of children had detectable blood lead levels compared to a national average of 51%¹. This is simply unacceptable. We should not tolerate elevated blood lead levels in any child, but we certainly should not tolerate a disparity among children based on their socioeconomic status.

For this reason, it is vital that we do what we can to protect our children. Lead toxicity is a preventable disease. While this bill is merely a small slice in a very large pie of all the ways to prevent this disease in our children, it is 100% necessary. We cannot tolerate exposing our children to this danger, especially in the places they are meant to be and feel the safest.

Thank you for your time and consideration.

Sincerely,

Catherine Gilligan MD

Source:

1. Hauptman M, Niles JK, Gudin J, Kaufman HW. Individual- and Community-Level Factors Associated With Detectable and Elevated Blood Lead Levels in US Children: Results From a National Clinical Laboratory. *JAMA Pediatr.* 2021;175(12):1252–1260. doi:10.1001/jamapediatrics.2021.3518



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Ref: 8LCRD-CSES

SENT BY ELECTRONIC MAIL

Colorado General Assembly
200 E Colfax Avenue
Denver, CO 80203

Re: Colorado Regulation 19 Revisions

Dear Colorado General Assembly:

This letter serves as support for the proposed revision of the Colorado Department of Public Health and Environment (CDPHE) Regulation Number 19, which updates the definition of “child-occupied facility”. Any State seeking EPA authorization to administer their own Lead-Based Paint Program in lieu of the federal program must demonstrate that their program is at least as protective as the federal program. The proposed revisions will ensure that the definition of child-occupied facilities meets the protective standards of the federal rules.

EPA appreciates all the work CDPHE’s Indoor Environment Program has done to protect the public and prevent exposure to lead-based paint hazards. Please feel free to reach out to me at 303-312-6983 or Pardue-welch.kimberly@epa.gov if you have any questions.

Sincerely,

Kimberly Pardue Welch, Branch Manager
Chemical Safety and Environmental Stewardship Branch

cc: Laura Manyak, Program Manager, CDPHE, Indoor Environment Program