MEMORANDUM IN SUPPORT

ESTABLISHING MAXIMUM CONTAMINANT LEVEL GOALS

S.2927 - CLEARE  A.2996 - THIELE

DESCRIPTION: Requires the Department of Health to establish a Maximum Contaminant Level Goal (MCLG) for every emerging contaminant for which it establishes a Maximum Contaminant Level (MCL)

JUSTIFICATION
A Maximum Contaminant Level Goal (MCLG) is the is the maximum level of a contaminant in drinking water at which no known or anticipated adverse effect on the health of persons would occur and which allows for an adequate margin of safety. An MCLG is non-enforceable, but provides important guidance to communities. A Maximum Contaminant Level (MCL) is the maximum permissible level of a contaminant in water that is delivered to a customer. Establishing the MCL is based on a number of factors, including health and economic impacts.

The U.S. Environmental Protection Agency (EPA) and New York State Department of Health (DOH) are responsible for establishing MCLs for harmful compounds in drinking water. Under the federal Safe Drinking Water Act, the EPA is required to establish an MCLG for each contaminant for which it establishes an MCL. However, in New York State, unlike the federal level, DOH is not required to establish an MCLG for every contaminant that it establishes an MCL for. This legislation would bring NY in line with federal policy and require an MCLG to be established when establishing an MCL.

Establishing an MCLG is important because:

- Vulnerable populations, including infants, the elderly, and those with compromised immune systems may choose to only consumer water that presents no known or anticipated adverse health effects.
- Water suppliers can choose to treat water to a level that presents no known or anticipated adverse health effects, going beyond the MCL requirement.
- As technology for water treatment and testing improves, MCL’s can and should be strengthened to match MCLGs
- The cost difference between treating a contaminant to the MCL and the MCLG can be significant, and when polluters can be identified, they should pay for the full cost to treat to levels where no known health effects are present.