

Submitted via: oshsb@dir.ca.gov

April 20, 2023

The Honorable David Thompson, Chair Occupational Safety & Health Standards Board 2520 Venture Oaks Way, Suite 350 Sacramento, CA 95833

RE: Support for Proposed Regulations to Amend the Cal/OSHA Lead Standards

Dear Mr. Thompson and members of the Board:

On behalf of the American College of Occupational and Environmental Medicine (ACOEM), I am writing to express strong support for the proposed amendments to the Cal/OSHA lead standards, as outlined in your rule-making announcement of March 3, 2023, affecting 8 CCR, Sections 1532.1, 5155 and 5198.

Founded in 1916, ACOEM is the nation's largest medical society dedicated to promoting employee health through preventive medicine, clinical care, research, and education. The College represents more than 4,000 physicians and other healthcare professionals specializing in occupational and environmental medicine (OEM) who are devoted to preventing and managing occupational injuries.

The OEM community has long regarded the current Cal/OSHA lead standards as outdated and not sufficiently protective in several vital areas. We believe these proposed revisions are consistent with the current literature and medical findings on occupational lead poisoning and ACOEM's past recommendations. We urge the Standards Board to adopt these proposed provisions promptly to safeguard the health of tens of thousands of California workers with occupational lead exposure.

We strongly recommend that the Board take into account the recent ACOEM Position Statementⁱ (*enclosed*) published in the March 2023 Journal of Occupational and Environmental Medicine in response to OSHA's Federal "Advance Notice of Proposed Rule Making (ANPRM) related to Blood Lead Level for Medical Removal" in the context of considering these proposed amendments and future improvements to the Cal/OSHA lead standards. This Position Statement, developed by an ACOEM working group, reinforced and expanded on October 2022 written commentsⁱⁱ to the OSHA Lead Docket (No. OSHA-2018-0004) and ACOEM's 2016 Workplace Lead Exposure Position Statementⁱⁱⁱ.

As an ardent proponent of preventive medicine, ACOEM believes that the proposed revisions to the lead standards represent a cost-effective approach to reducing morbidity and mortality resulting from occupational lead exposure. In this regard, ACOEM takes particular note of the California Department of Industrial Relations 2020 report, *Standardized Regulatory Impact Assessment: Revisions to Occupational Lead Standards*^{iv}, which states (pg. 42), "The value of the benefits estimated here is far greater than the estimated costs associated with the proposed regulation. Moreover, these benefits estimates represent only a fraction of the total potential benefits because we have not quantified many of the other health benefits likely to accrue from the proposed regulation."

Additionally, we believe the Board can strengthen these proposed rules regarding the definition of "physician" for the purposes of performing or overseeing medical surveillance examinations. The current Cal/OSHA lead standards do not mandate that the term "physician" should apply only to medical professionals trained and licensed as a Doctor of Medicine (MD) or Doctor of Osteopathic Medicine (DO). Regrettably, we are aware that in the past, some employers have engaged other healthcare professionals, including paramedics or chiropractors, to oversee their mandated medical surveillance programs. These providers lack the requisite training, knowledge, and experience to evaluate the complex health effects of lead exposure on multiple organ systems. Accordingly, we urge the Board to amend the proposed text by including a specific definition of "physician" in subsection (b) of 8 CCR 1532.1 and 5198, clarifying the application of these provisions to MDs and DOs. This clarification would be consistent with a 2016 Federal OSHA Letter of Interpretation on the matter.

We would also direct the Board to consider any comments provided by the Western Occupational and Environmental Medical Association (WOEMA), which has actively participated in the Cal/OSHA Advisory Committee on the lead standards, urging more stringent requirements for airborne exposure limits, medical surveillance examinations, medical removal protection, and other measures.

If you should have any questions or need additional information, please contact Dane Farrell (Dane@cascadeassociates.net), ACOEM's Government Affairs Representative.

Thank you for your consideration, and we look forward to collaborating with the Division and the Standards Board in proposing these critical revisions, and we urge the Standards Board to act swiftly to adopt them.

Sincerely,

Kenji Saito, MD, JD, FACOEM

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President

American College of Occupational and Environmental Medicine (ACOEM)

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¹ Kosnett, Michael J. MD, MPH; Berenji, Manijeh MD, MPH; Burton, Anthony D. MD, MPH; Durand-Moreau, Quentin MD; Esty, Elizabeth MD; Fischman, Michael MD, MPH; Hudson, Thomas Warner III MD; Nabeel, Ismail MD, MPH; Papanek, Paul J. MD, MPH; Sokas, Rosemary MD, MOH. ACOEM Position Statement: Workplace Health and Safety Necessitates an Update to Occupational Lead Standard Provisions for Medical Removal Protection, Medical Surveillance Triggers, and the Action Level and Permissible Exposure Level for Lead in Workplace Air: ACOEM Response to OSHA. Journal of Occupational and Environmental Medicine 65(3):p e170-e176, March 2023. | DOI: 10.1097/JOM.0000000000002774

ii https://acoem.org/acoem/media/News-Library/Final-Lead-Comments-to-OSHA-October-2022.pdf

iii https://acoem.org/acoem/media/News-Library/Workplace Lead Exposure.pdf

^{iv} BEAR (Berkeley Economic Advising and Research, LLC). Standardized Regulatory Impact Assessment: Revisions to Occupational Lead Standards. 2019; revised 2020. Online Access

v https://www.osha.gov/laws-regs/standardinterpretations/2016-05-10