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April 14, 2023

Kristin L. Fontenot Director, Office of Environment and Energy Department of Housing and Urban Development 451 Seventh Street SW, Room 7282 Washington, DC 20410-8000

RE: Comments on CPD-21-136 "Departmental Policy for Addressing Radon in the Environmental Review Process"

Submitted electronically through the Federal eRulemaking Portal at <u>www.regulations.gov</u>.Docket No. FR-6358-N-01

The American Lung Association appreciates the opportunity to respond to a request for comments pursuant to the February 13, 2023 issuance of the Department of Housing and Urban Development's (HUD's) draft Departmental Policy for Addressing Radon in the Environmental Review Process (CPD-21-136 or "CPD notice").

The Lung Association is the leading health voluntary organization dedicated to saving lives by improving lung health and preventing lung disease. We have been actively engaged in research, education and advocacy to protect the public from indoor air pollution, including radon, in homes, schools and workplaces for over 30 years.

We applaud HUD's leadership in recognizing the risk that exposure to radon and its radioactive decay products poses for residents of properties under its jurisdiction, and in seeking to establishing programs and policies that would be effective in confronting and successfully abating that risk.

The Lung Association acknowledges the CPD notice as a worthwhile step toward achieving the kinds of protections that occupants of HUD-managed housing deserve. We understand that detailed corrections or modifications have been suggested by other commenters, so we will not reiterate such. Nevertheless, since the Lung Association supports policies that are both comprehensive and effective in protecting lung health, we do wish to emphasize a few essential points for HUD's consideration:

Although HUD might not be authorized, under a sub-regulatory process, to exceed the limitations of certain existing requirements, the Lung Association nevertheless encourages HUD to:

- recognize that agencies subject to it are required to follow state and local law;
- recommend that such agencies act in accordance with nationally recognized voluntary consensus standards; and
- move in a timely manner toward a more prescriptive and comprehensive regulatory approach.

Given that:

- "it is HUD's policy that all properties proposed for use in HUD programs be free of radioactive substances, where a hazard could affect the health and safety of occupants," [emphasis added];
- "HUD encourages environmental review preparers to follow the most recent EPA recommendations about assessing the health risk from radon exposure and when to reduce radon levels in indoor air;"
- those EPA recommendations specifically prefer "reliance on privately developed voluntary consensus-based standards" such as the current ANSI/AARST standards that require testing *all* ground-contact space suitable for occupancy—and a prescribed fraction of space, at minimum, in upper areas of multistory buildings—as necessary to ensure that testing comprehensively identifies potential radon problems;
- non-trained individuals are often not fully cognizant of the conditions necessary to attain valid test results; and
- property owners are reasonably expected to have conflicts of interest regarding the outcome of radon testing,

it is therefore the Lung Association's position that HUD **cannot justify as sufficient** any determination regarding radon testing in which **either**

- less than all environments specified by the current expert consensus standards are tested, or
- such testing is not professionally performed according to the current expert consensus standards

is adopted as a provision of or allowance of any HUD policy, directive, or regulation.

Furthermore, given the following:

- That high radon levels have been found in every state and in the great majority of the nation's counties, even as testing rates have been low,
- That the U. S. Environmental Protection Agency (EPA) has long been on record indicating that its Map of Radon Zones "is not intended to be used to determine if a home in a given zone should be tested for radon,"
- And that, rather, the health-protective recommendation, from both the EPA and the U.S. Surgeon General has for decades been that "All homes should be tested regardless of geographic location,"

it is therefore the Lung Association's position that HUD **cannot justify** any provision or mechanism that purports to determine in advance "whether the project site is located in an area identified as having a high potential for elevated radon levels," but must instead adopt a policy that fully supports radon testing being carried out according to rigorous standards in all buildings without exception. Simply, the only way to know if radon is a problem in a building is to test for it.

In conclusion, the American Lung Association recognizes the serious risk of lung cancer and death that radon poses and as such, we advise that **all** occupied indoor spaces be tested for radon, and if elevated levels are confirmed to be present, those buildings should be properly mitigated. For all HUD-assisted projects, but especially those in which non-occupant parties with potential conflicts of interest are involved (e.g., owners of rental properties), the Lung Association strongly advises that radon testing be performed by independent qualified radon testing professionals, and that any radon mitigation work likewise be provided by independent qualified

radon mitigation professionals. To do otherwise poses a greater likelihood of improper characterization of the radon situation in residential units or of failure to properly mitigate elevated concentrations, thereby putting people at risk compared with those in buildings in which radon services are performed by qualified independent professionals following recognized standards of practice.

If the Office of Environment and Energy should have any questions or need more information, please contact Kevin Stewart, Director of Environmental Health, 717-971-1133 or kevin.stewart@lung.org.

Thank you,

The American Lung Association