



Meeting Summary Health Profile Workgroup Feb. 27, 2008

The Health Profile Workgroup held their first meeting Feb. 27, 2008, at the Missouri Department of Natural Resources' Elm Street Conference Center in Jefferson City. Twenty-seven people attended the meeting, either in-person or by telephone conference call. These people represented hazardous waste permitted facilities, universities, environmental consultants, contractors, attorneys, several Missouri state agencies, and other interested parties. A copy of the [agenda](#) and [attendance](#) list is attached.

I. Welcome and Introductions:

Darleen Groner, representing the department's Hazardous Waste Program, opened the meeting and welcomed the workgroup members. She asked each meeting participant to introduce themselves and include their interest in Health Profiles. Ms. Groner described the goal of the workgroup and discussed the logistics of today's meeting. Heidi Rice, also representing the department's Hazardous Waste Program, told the conference call participants that all handouts and presentations for the meeting are posted on the Health Profile Workgroup's Web site (www.dnr.mo.gov/env/hwp/hprofile/profilewkgrp.htm), on the "Next Meeting" page, so they could follow along with the speakers.

II. Health Profile

Ms. Groner gave a presentation describing the Health Profile requirements outlined in Missouri's hazardous waste law and regulations. Ms. Groner gave some background on discussions that the Department of Natural Resources (DNR) and Department of Health and Senior Services (DHSS) have had on the health profile requirements. The departments do not believe health profiles, as written according to the statute and regulation, achieve the goals originally envisioned by the legislature. The departments' priority is to remain protective of human health and the environment. The workgroup's goal is to to revise and/or streamline the process. A copy of the [presentation](#) and [handout](#) is attached.

Ms. Groner introduced John Doyle, representing Barr Engineering Co. Mr. Doyle is a former Department of Natural Resources employee who helped draft the Health Profile regulations. Originally the legislatures thought health profiles would pick up health issues quickly. They envisioned health profiles as ongoing monitoring, not completed every 10 years like they are currently. The process selected was difficult to define in a manner that best accomplished this goal.

The statement was made that health issues will show up in the community before a health profile would be capable of showing that result. The group discussed both a [Southeast Kansas](#) and [Texas](#) health study. Each study was started because the surrounding communities brought the issue to the respective state or the U.S. Environmental

Protection Agency (EPA). In both studies, concentrations of the hazardous contaminants were below established thresholds. A link to both studies will be provided on the workgroups Web site.

III. Issues with Current Health Profiles

Ms. Groner introduced Gale Carlson, the DHSS Environmental Section Chief. Mr. Carlson gave a presentation describing some issues with the current health profiles. A copy of his [health profile guidance](#) and [DHSS health profile efficacy letter](#) are attached.

Although DHSS keeps certain statistics, such as some cancers and birth defects, not 100% is reported. The information available is not statewide and doesn't include doctor's office or emergency room visits. Mr. Carlson explained that it is difficult to isolate the data for populations. A question was raised as to why health profiles are performed by zip code, but not the zip + 4 code. It was explained that within the last four years DHSS has started geocoding residences. The problem is, they don't have information for comparisons.

Even if DHSS could isolate the data, the data would be so small there would be no statistical significance. There are issues with low population density surrounding the facilities because they are not built in big communities. Census data is only captured every 10 years and does not take into account people moving in and out of the communities. A suggestion was made to study the facility's employees for health problems. Mr. Carlson explained that these types of studies are handled by OSHA or NIOSH.

Another suggestion was to perform exposure investigations. Mr. Carlson stated that DHSS could handle these if the money was available. Because of the expense, usually DHSS only performs these studies when a community member comes to them concerned by an illness caused by an environmental threat. There are a number of steps that must be taken before DHSS will draw blood and talk to community members. DHSS must identify everyone that could possibly be exposed and locate everyone. They must then get permission from the community members to answer a questionnaire. If DHSS is comfortable that the information from the questionnaire is showing that the community is actually being exposed, they will then develop an exposure rate. If the exposure rate is significant, then DHSS will study the actual health effects. As an example, this type of study was completed on the effects of dioxin in Times Beach, Missouri.

A third suggestion was performing a cancer inquiry. Mr. Carlson explained that cancer inquiries are also done only if someone from the community raises the issue. It is difficult for DHSS to isolate that information from the cancer registry. A concern was raised as to the adequacy of Missouri's Cancer Registry. It was explained that Missouri's registry is currently a gold ranking. DHSS is trying to get a platinum rating, meaning over 90% of cancers are reported.

IV. Group Discussion

Ms. Groner introduced John Perrin, representing BASF Corporation. Mr. Perrin discussed a document that he wrote concerning inherent problems with health profiles. A copy of the [handout](#) is attached.

Mr. Perrin (and the other hazardous waste combustors) commented that a lot of regulatory development and studies have occurred since the original health profile requirements, which may inherently address the original issues intended by the health profile statute. These regulations, and corresponding emission limits (through RCRA, Water and Air requirements and permits, and most recently HWC MACT for hazardous waste combustors), have required that facilities operate in a manner to minimize risk to human health and the environment. The emission standards have continued to decrease over time, and the HWC MACT rules development process included an evaluation of risk as part of the rule development to set the emissions standards.

Given that both departments and the workgroup participants agree that the health profile requirements as written are not accomplishing the intended goal, there was much discussion on possibilities and approaches for changes. The department stated the importance of having a process to protect human health and the environment, and the sensitivity surrounding this topic for the public. The potential for defining all other requirements today that also contribute to evaluating risk potential as a means to address protection of human health and the environment was also brought up by both departments. Although there are other possibilities, the challenge in the short term stems from permits pending and the statute and rules still being in force as written.

1. What are other states doing?

Ms. Groner asked the group if they knew of other states that have similar health profile requirements. Several members stated that no states within EPA Regions 4, 5, 6 and 7 (with the exception of Missouri) have this requirement.

2. Is it possible to get a Variance?

Shelley Woods, the attorney assigned to the Hazardous Waste Management Commission, said it is possible, but the facility must present adequate proof, that "...compliance with any provision of sections 260.350 to 260.430 or any standard, rule or regulation...will result in an arbitrary and unreasonable taking of property or in the practical closing and elimination of any lawful business, occupation or activity, in either case without sufficient corresponding benefit or advantage to the people."

A question was raised as to whether language could be put in hazardous waste permits or if a consent decree would be easier instead of a variance to set aside the health profile requirement until the issue is settled. Ms. Woods explained that these suggestions are more of a public relations issue because of the emotional element. It was proposed to put the permits held up by health profiles on hold instead.

3. Change or rescind the regulations/statute?

There were three main suggestions 1) rescind both the statute and regulation, 2) change both the statute and regulation or 3) change the regulation while still following the current statute. The difficulty of changing the regulations and/or the statute was discussed at length. Due to the challenge of needing to evolve or eliminate this requirement, which would require an amendment to the regulation and potentially the statute, it was determined that more work would be needed for both addressing short and long-term needs.

V. Wrap Up and Next Steps

The workgroup members decided to form two subgroups (1) Long-term Solutions and (2) Short-term Solutions.

Members (volunteered for both groups unless otherwise noted):

- Leonard Rosenkrans, Continental Cement Co.
- John Perrin, BASF Corp.
- Roger Walker, REGFORM
- Lina Klein, Aquaterra Environmental Solutions Inc.
- Paul Detterline, Holcim (US) Inc./Geocycle, LLC
- Cherri Baysinger, DHSS
- Lori Harris-Franklin, DHSS
- Gale Carlson, DHSS
- Richard Rocha, Bayer Cropscience
- Terry Hawkins, DNR-DGLS (long-term)
- Bradley Meyr, Buzzi Unicem USA
- Jim Price, Spencer, Fain, Britt and Browne, LLP
- Carrie Yonley, Schreiber, Yonley & Associates
- John Doyle, Barr Engineering Co.
- Margaret Tyler, DHSS (short-term)

*Because the member lists for both groups was almost exact, DNR decided to combine the groups.

Ms. Groner suggested that the workgroup meet again in 6 weeks to further work through the health profile issues and potential solutions. The meeting participants agreed. Ms. Groner thanked the meeting participants for taking the time to meet and discuss Health Profiles.

Action Items:

1. Put together and post meeting summary on the workgroup Web site – Heidi Rice
2. Add links to the Southeast Kansas Health Study and Texas Health Study to the workgroup Web site – Heidi Rice
3. Have Exide's health profile reviewed/evaluated/updated by June 30, 2008, and BASF's completed by June 30, 2009 – DHSS

4. Prepare an options matrix (pros and cons of each possible short- and long-term solution) to be e-mailed to the stakeholder group prior to the next meeting – Rich Nussbaum and Darleen Groner.
5. Schedule next meeting for mid-April 2008. A call-in number will be provided for participants unable to travel to Jefferson City. – Heidi Rice