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Pursuant to State Government Article, §7-206, Annotated Code of Maryland, this issue contains all previously unpublished documents required to be published, and filed on or before April 6, 2020 5 p.m.

Pursuant to State Government Article, §7-206, Annotated Code of Maryland, I hereby certify that this issue contains all documents required to be codified as of April 6, 2020.

Gail S. Klakring
Acting Administrator, Division of State Documents
Office of the Secretary of State



Title 26

DEPARTMENT OF THE ENVIRONMENT

Notice of Proposed Action

[20-085-P-I]

The Secretary of the Environment proposes to:

- (1) Repeal existing Regulations .01—.05 and adopt new Regulations .01—.05 under **COMAR 26.02.01 Blood Lead Reporting**;
- (2) Amend Regulations .02 and .12 under **COMAR 26.02.07 Procedures for Abating Lead Containing Substances from Buildings**;
- (3) Amend Regulation .02 under **COMAR 26.16.01 Accreditation and Training for Lead Paint Abatement Services**;
- (4) Amend Regulations .02, .02-1, and .05 under **COMAR 26.16.02 Reduction of Lead Risk in Housing**;
- (5) Amend Regulations .01—.03, .10, and .12 under **COMAR 26.16.05 Procedures for Performing Lead Paint Abatement Services**; and
- (6) Adopt new Regulations .01—.08 under a new chapter, **COMAR 26.16.08 Environmental Investigations**.

Statement of Purpose

The purpose of this action is to:

- (1) Establish procedures for conducting an environmental investigation when a child under the age of 6 or a pregnant woman is diagnosed with elevated blood lead (EBL);
- (2) Update the Maryland Department of the Environment's (MDE) regulations governing blood lead reporting by laboratories and health care providers; and
- (3) Establish more stringent standards for lead content in dust for the purpose of post-abatement clearance testing and satisfying the risk reduction and modified risk reduction standards.

The proposed regulations governing environmental investigations are required for MDE to comply with Chapter 341, Acts of 2019. The law lowered the level that constitutes EBL in the State to the U.S. Centers for Disease Control and Prevention (CDC) blood lead reference level of 5 micrograms per deciliter (reference level). Chapter 341 further required MDE on or before July 1, 2020, to adopt regulations for conducting an environmental investigation when a child under age 6 or a pregnant woman is diagnosed with EBL. The regulations must be consistent with or more stringent than the U.S. Department of Housing and Urban Development's (HUD) Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (HUD Guidelines).

The proposed changes to the blood lead reporting regulations would add information to be reported by laboratories to MDE with blood lead level test results. The proposal also makes various stylistic changes and updates the blood lead levels specified in the reporting regulations to be consistent with the new, lower EBL level.

Additionally, the proposed action is needed to make the dust-lead levels used in the State's post-abatement clearance standards and risk reduction standards consistent with the federal dust-lead hazard standards (DLHS) in 40 CFR Part 745. The federal DLHS is used during a risk assessment to identify the presence of dust-lead hazards in a residential property where a child under the age of 6 resides or a child-occupied facility. Effective January 6, 2020, the new federal DLHS for floors and interior window sills are 10 and 100 micrograms per square foot, respectively. The proposed action would lower the State dust-lead level standards for post abatement clearance and risk reduction standards to 10 and 100 micrograms per square foot for floors and window sills, respectively, and would establish a standard of 100 micrograms per square foot for window wells. The proposal also defines the term "quantitation limit" as it relates to the measurement of lead, and requires a State-accredited lead paint inspector to submit certain environmental samples collected during a lead inspection to a laboratory recognized under the U.S. Environmental Protection Agency's (EPA) National Lead Laboratory Accreditation Program (NLLAP) as capable of performing sampling and lead testing.

Comparison to Federal Standards

In compliance with Executive Order 01.01.1996.03, this proposed regulation is more restrictive or stringent than corresponding federal standards as follows:

- (1) Regulation citation and manner in which it is more restrictive than the applicable federal standard:

COMAR Codification: COMAR 26.02.07.12K, COMAR 26.16.02.02(B)(6), and COMAR 26.16.05.10A.

Corresponding Federal Standard: 40 CFR §745.227(e)(8)(viii)

The proposed dust-lead level standards for clearance of abatement projects are more restrictive than the applicable federal standards in 40 CFR §745.227(e)(8)(viii). Upon the completion of a lead abatement project performed in accordance with MDE's abatement regulations in COMAR 26.02.07, a State-accredited lead paint inspector is required to perform a clearance inspection for lead-contaminated dust to determine if dust-lead levels are less than the dust-lead level values in COMAR 26.02.07.12K or COMAR 26.16.02.02B(6). COMAR 26.02.07.12 regulates clearance inspections performed by an MDE-employed State-accredited lead paint inspector, and COMAR 26.16.05.10, which cross-references the dust-lead level standards under COMAR 26.16.02.02B(6), regulates clearance inspections performed by a private State-accredited lead paint inspector.

The proposed dust-lead level standards for abatement would require that a residential property or group daycare center have cleaned surfaces with dust-lead levels less than 10, 100, or 100 micrograms per square foot for floors, window sills, or window wells, respectively, to comply with MDE's abatement regulations. Although the dust-lead levels for floors and window sills in the federal DLHS used for risk assessments are identical to those in the State dust-lead level standards for abatement proposed in this action, EPA has not revised the federal clearance levels for abatement. Currently, the federal clearance levels for abatement are less than 40, 250, or 400 micrograms per square foot for floors, window sills, or window wells, respectively. EPA has initiated a separate rulemaking to lower the federal clearance levels in 40 CFR §745.227(e)(8)(viii) to be consistent with the federal DLHS, with plans to finalize the rule in July 2021.

- (2) Benefit to the public health, safety or welfare, or the environment:

In preparing to lower the federal DLHS, EPA's evaluation of the health outcomes in young children found that health risks decrease with decreasing dust-lead levels, with incremental decreases to blood lead levels and adverse health effects seen at all points below the former DLHS of 40 and 250 micrograms per square foot for floors and window sills, respectively. 84 Fed. Reg. 32632–32648 (2019). Adverse human health effects linked

to lead exposure in children include decreased cognitive performance, increased behavioral problems, and increased diagnoses of attention-related behavioral problems.

The proposed action would require lower dust-lead levels following an abatement project, further reducing the risk of lead exposure to Maryland children and the accompanying adverse human health effects.

(3) Analysis of additional burden or cost on the regulated person:

While developing its 2019 rulemaking that lowered the federal DLHS, EPA considered a 2015 EPA and HUD Office of Lead Hazard Control and Healthy Homes (OLHCHH) survey of HUD Lead Hazard Control (LHC) grantees. 84 Fed. Reg. 32639 (2019). The survey revealed that a reduction in the federal dust-lead level standards for hazard determination and clearance to the same levels proposed in this action would be technically feasible using current cleaning methods. For example, the survey included test results for 7,211 floor clearance samples and found an estimated 85 percent of final floor clearance results were equal to or less than 10 micrograms per square foot, the standard being proposed in this action, even though the grantees were attempting only to meet a standard of 40 micrograms per square foot. The survey also found that only cleaning of floors was conducted in 75 percent of the units in the survey, and only cleaning and/or sealing of floors was done in 90 percent of units, leading to a conclusion that the standard of 10 micrograms per square foot for floors is “generally technically feasible using only cleaning and/or sealing of floors” as opposed to more costly and less common methods (see HUD OLHCHH Lead Hazard Control Clearance Survey, October 2015). Therefore, MDE expects that the majority of properties that undergo abatement clearance testing will pass the test and can do so without the need to implement additional, more costly methods. In 2017, subsequent to the 2015 EPA and HUD study, HUD issued policy guidance stating that all LHC and Lead Hazard Reduction (LHR) grantees must begin using lower dust-lead action levels and clearance levels that are consistent with the levels proposed in this action. For LHC and LHR grantees, the dust-lead levels proposed here for post-abatement clearance are already required under HUD policy guidance for clearance.

Based on the above, MDE has determined that the burden of the proposed lower dust-lead level standards on property owners that hire State-accredited lead paint abatement service providers to conduct abatement and post-abatement clearance testing would be minimal. The majority of properties could be cleared with little or no additional work and testing.

(4) Justification for the need for more restrictive standards:

The proposed dust-lead level standards for post-abatement clearance are more protective of the public health, safety, and welfare of Maryland’s young children. Despite EPA’s decision not to lower the clearance levels for abatement in its 2019 rulemaking, the scientific bases relied upon by EPA to lower the DLHS for risk assessments also support more stringent clearance levels for abatement. Specifically, research shows a relationship between lead loadings in dust, blood lead levels, and adverse health outcomes. The proposed more restrictive dust-lead level standards for abatement would reduce the likelihood a dust-lead hazard remains in an abated property because the State and federal dust-lead level standards for abatement are less stringent than the federal DLHS used to identify dust-lead hazards in which exposure could result in adverse health effects. The proposal may also reduce confusion among accredited lead paint inspectors and property owners by eliminating the situation where there are two different dust-lead level standards depending on whether the dust testing is done for the purpose of a risk assessment or post-abatement clearance.

Estimate of Economic Impact

I. Summary of Economic Impact. The proposed action has three major components: (1) procedures for environmental investigations; (2) updates to the blood lead test reporting requirements; and (3) more stringent standards for dust-lead levels for the purpose of post-abatement clearance testing and meeting the risk reduction and modified risk reduction standards.

The proposed action would benefit the families of Maryland that have young children. Under the proposed action, the earlier State and local government intervention in cases of EBL in a child or pregnant woman, codified environmental investigation procedures based on the HUD Guidelines, and lower dust-lead level standards will ultimately reduce lead exposure among children and pregnant women in Maryland. These benefits may translate into economic benefits in the form of reduced healthcare and other costs associated with the adverse health effects of lead poisoning. Other public and private stakeholders impacted by the proposed action would not experience an economic impact as a result of the proposed action, as described below.

II. Types of Economic Impact.	Revenue (R+/R-)	Magnitude
	Expenditure (E+/E-)	
A. On issuing agency:	NONE	
B. On other State agencies:	NONE	
C. On local governments:	NONE	
	Benefit (+)	Magnitude
	Cost (-)	
D. On regulated industries or trade groups:		
(1) Property owners	NONE	
(2) Lead paint abatement service providers	NONE	
(3) Blood lead testing labs and health care providers	NONE	
E. On other industries or trade groups:	NONE	
F. Direct and indirect effects on public:	(+)	Meaningful

III. Assumptions. (Identified by Impact Letter and Number from Section II.)

A. The proposed procedures for conducting environmental investigations would not have an economic impact on MDE beyond the impact created

by Chapter 341, Acts of 2019. Under that law, MDE was required to adopt regulations providing for an environmental investigation for a child under the age of 6 or pregnant woman diagnosed with an EBL level greater than or equal to the CDC reference level. The law also required MDE to assist local governments with case management of children with EBL levels greater than or equal to the reference level. Chapter 341 required MDE's procedures for environmental investigations to be consistent with or more stringent than the HUD Guidelines. By lowering the blood lead level that is considered EBL and requiring an environmental investigation to be conducted for every child under the age of 6 or pregnant woman diagnosed with EBL, Chapter 341 increased the number of environmental investigations that must be conducted by MDE or a local health department by an estimated 900 cases per year. The fiscal impact to MDE from these additional environmental investigations was estimated by the Department of Legislative Services prior to the passage of the law. The proposed action carries out in regulations the requirements of Chapter 341 and would not result in any additional economic impact on MDE beyond the impact already resulting from Chapter 341. For environmental investigations currently conducted for cases of EBL levels of greater than or equal to 10 micrograms per deciliter, MDE already follows internal operating procedures that are generally based on the HUD Guidelines; therefore, the proposed action would not result in an economic impact for conducting these environmental investigations.

The proposed changes to the blood lead reporting regulations and the dust-lead level standards would have no economic impact on MDE. The proposal would require additional information to be reported to MDE with blood lead level test results and would require test results to be submitted to MDE within a shorter period of time for blood lead levels greater than or equal to the reference level. These changes would not affect MDE's costs to administer the Childhood Lead Registry database.

The reduction in the dust-lead level standards for post-abatement clearance testing would not increase MDE's inspection and dust sampling costs to perform clearance inspections at residential properties and group daycare centers under COMAR 26.02.07.12. The laboratory that MDE currently uses to analyze dust samples already has the capability of measuring dust-lead levels to the proposed lower dust-lead level standards.

C. The environmental investigation regulations proposed in this action would not have an economic impact on a local government beyond the impact under Chapter 341, Acts of 2019. Under Environment Article, §6-304, Annotated Code of Maryland, MDE is required to assist local health departments in case management of children with EBL levels greater than or equal to the reference level. As a result of Chapter 341, MDE must adopt regulations providing for an environmental investigation for a child under the age of 6 or pregnant woman diagnosed with an EBL level of greater than or equal to the reference level. As described in the Department of Legislative Services' fiscal and policy note for Chapter 341, "[b]ecause this analysis assumes that MDE assists [local health departments] as necessary, the bill is not anticipated to have a significant impact on [local health departments] in terms of case management. MDE is required by statute to assist local governments with environmental investigations, so there is no material impact related to environmental investigations." Under the proposed action, a local health department will still be able to determine how much case management it can effectively provide and request that MDE supplement and assist with any case management activities it cannot perform. Currently MDE conducts environmental investigations for cases of EBL levels greater than or equal to 10 micrograms per deciliter in all jurisdictions except two (Baltimore City and Prince George's County), where the local health departments conduct the investigations. The proposed action is not expected to materially affect costs for these two jurisdictions to continue conducting these environmental investigations. At this time, MDE anticipates conducting environmental investigations for cases of EBL levels between 5 and 9 micrograms per deciliter in all jurisdictions except Baltimore City, where the Baltimore City Health Department intends to provide the environmental investigations.

Analysis of the impact of the changes to the dust-lead level standards on local governments that own residential properties would be the same as described under D(1) below.

D(1). Owners of residential properties, both owner-occupied and rental, and other properties frequented by young children may be affected under the proposed action, but will not experience increased expenditures to comply with the proposed action. The proposed environmental investigation procedures would be carried out by MDE or a local health department and would not have an economic impact on a property owner. The proposed changes to the blood lead reporting regulations would not impact a property owner.

Under existing requirements, an owner of a residential property or group daycare center that has lead abatement done to the property must hire an accredited lead paint inspector to determine that the property has met the dust-lead level standards for post-abatement clearance. The proposed action would lower the dust-lead level standards that must be met during this clearance inspection. The property owner's costs for employing a lead paint abatement contractor or lead paint inspector (to conduct the clearance test) are not expected to increase as a result of the lower dust-lead level standards. Additionally, an owner of a pre-1978 residential rental property is currently required to hire an accredited lead paint inspector to determine that the property meets the dust-lead level standards for the purposes of satisfying the risk reduction or modified risk reduction standards under §§6-815 and 6-819 of the Environment Article. The property owner's costs for satisfying the risk reduction or modified risk reduction standards are not expected to increase as a result of the lower dust-lead level standards.

It is anticipated that in most cases where dust testing is necessary for post-abatement clearance or meeting a risk reduction standard, the property will meet the lower dust-lead level standards without the need for additional work or retesting that would result in extra costs to the property owner. While developing its 2019 rulemaking that lowered the federal DLHS, EPA considered a 2015 EPA and HUD Office of Lead Hazard Control and Healthy Homes (OLHCHH) survey of HUD Lead Hazard Control (LHC) grantees. 84 Fed. Reg. 32639 (2019). The study revealed that a reduction in the federal dust-lead level standards for hazard determination and clearance to the same levels proposed in this action would be technically feasible using current cleaning methods.

For example, the survey included test results for 7,211 floor clearance samples and found an estimated 85 percent of final floor clearance results were equal to or less than 10 micrograms per square foot, the standard being proposed in this proposed action, even though the grantees were attempting only to meet a standard of 40 micrograms per square foot. The survey also found that only cleaning of floors was conducted in 75 percent of the units in the survey, and only cleaning and/or sealing of floors was done in 90 percent of units, leading to a conclusion that the standard of 10 micrograms per square foot for floors is "generally technically feasible using only cleaning and/or sealing of floors" as opposed to more costly and less common methods (see HUD OLHCHH Lead Hazard Control Clearance Survey, October 2015). Therefore, MDE expects that the majority of properties that undergo dust testing for post-abatement clearance or to satisfy a risk reduction standard will pass the test under the proposed standards and can do so without needing to implement additional, more costly methods. In 2017, subsequent to the 2015 EPA and HUD study, HUD issued policy guidance stating that all LHC and Lead Hazard Reduction (LHR) grantees must begin using lower dust-lead action levels and clearance levels that are consistent with the levels proposed in this action. For LHC and LHR grantees, the dust-lead levels proposed here for post-abatement clearance are already required under HUD policy guidance for clearance. Based on the above, MDE has determined that the economic impact of the

proposed lower dust-lead level standards on property owners that hire State-accredited lead paint abatement service providers to conduct abatement and post-abatement clearance testing would be minimal. The majority of properties could be cleared with little or no additional work and testing.

D(2). Businesses providing lead paint abatement services may be affected under the proposed action, but their finances will not be materially impacted. An abatement contractor may need to re-clean a property and a lead paint inspector may need to re-inspect a property if a client's property fails a dust test under the proposed dust-lead level standards for post-abatement clearance testing or satisfying the risk reduction standards. However, MDE expects that in most cases a property will not need to be re-cleaned or re-inspected (see D(1) above).

D(3). Under the proposed action, health care providers and medical laboratories, including clinics performing point of care blood lead testing, may need to adjust their operations to collect the additional test information and to report the increased number of EBL level test results between 5 and 19 micrograms per deciliter within 24 hours of a final test result. However, MDE does not expect this adjustment to result in increased expenditures for these facilities. Many health care providers already collect as part of a patient's records the additional information requested in this proposed action. Although the existing blood lead reporting regulations require blood lead level test results of greater than or equal to 20 micrograms per deciliter to be reported to MDE within 24 hours after the final test result, under a mutual agreement with MDE the majority of medical laboratories already report blood lead level test results of greater than or equal to 10 micrograms per deciliter within 24 hours. Also, since the CDC has used the blood lead reference level of 5 micrograms per deciliter since 2012, some medical laboratories report blood lead level test results of greater than or equal to 5 micrograms per deciliter to MDE within 24 hours.

F. The proposed action will result in a benefit to Maryland families with young children. The proposed blood lead reporting requirements will shorten the period between a child's diagnosis of EBL and MDE being notified of the test result. This shortened notification period will allow MDE and local health departments to commence case management for a lead-poisoned child under the age of 6 more quickly, potentially reducing the child's continued exposure to lead. The proposed action will also benefit Maryland families with young children by codifying environmental investigation procedures, used by MDE or a local health department, that are consistent with the HUD Guidelines and contain inspection and sampling procedures for identifying the lead exposure risks in a child's or pregnant woman's environment. The proposed action's lowered dust-lead level standards, earlier State and local government intervention in cases due to shortened EBL level test result reporting time frames, and the environmental investigation procedures will ultimately reduce exposure to lead, particularly among young children. These benefits may translate into economic benefits in the form of reduced health care costs and other costs (e.g., lost future wages) associated with the adverse health effects of lead poisoning.

Economic Impact on Small Businesses

The proposed action has minimal or no economic impact on small businesses.

Impact on Individuals with Disabilities

The proposed action has no impact on individuals with disabilities.

Opportunity for Public Comment

Comments may be sent to Erica Chapman, Administrator II, Land and Materials Administration, Maryland Department of the Environment, 1800 Washington Blvd., Suite 610, Baltimore, MD 21230, or call 410-537-3304, or email to erica.chapman@maryland.gov, or fax to 410-537-3002. Comments will be accepted through May 26, 2020. A public hearing has not been scheduled.

Editor's Note on Incorporation by Reference

Pursuant to State Government Article, §7-207, Annotated Code of Maryland, the documents listed below have been declared documents generally available to the public and appropriate for incorporation by reference: For this reason, they will not be printed in the Maryland Register or the Code of Maryland Regulations (COMAR). Copies of these documents are filed in special public depositories located throughout the State. A list of these depositories was published in 47:1 Md. R. 9 (January 3, 2020), and is available online at www.dsd.state.md.us. These documents may also be inspected at the office of the Division of State Documents, 16 Francis Street, Annapolis, Maryland 21401.

(1) The U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Second Edition, July, 2012), Chapter 7: Lead-Based Paint Inspection;

(2) Standard Practice for Collection of Settled Dust Samples Using Wipe Sampling Methods for Subsequent Lead Determination (ASTM Standard E1728/E1728M-20, 2020 Edition);

(3) Standard Specification for Wipe Sampling Materials for Lead in Surface Dust (ASTM Standard E1792-03, Reapproved 2016);

(4) General requirements for the competence of testing and calibration laboratories (ISO/IEC 17025:2017(E));

(5) The U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Second Edition, July, 2012), Chapter 16: Investigation and Treatment of Dwellings that House Children with Elevated Blood Lead Levels;

(6) Standard Practice for Field Collection of Dried Paint Samples for Subsequent Lead Determination (ASTM Standard: E1729-16, 2016 Edition); and

(7) Standard Practice for Field Collection of Soil Samples for Subsequent Lead Determination (ASTM Standard: E1727-16, 2016 Edition).

Subtitle 02 OCCUPATIONAL, INDUSTRIAL, AND RESIDENTIAL HAZARDS

26.02.01 Blood Lead Reporting

Authority: Environment Article, §6-303, Annotated Code of Maryland

.01 Definitions.

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

(1) "Blood lead analysis" has the meaning stated in COMAR 10.11.04.02B.

(2) "Blood lead level test" means to:

- (a) Draw a blood specimen, by either venous or capillary methodology, and:
 - (i) Send the blood specimen to a medical laboratory for blood lead analysis; or
 - (ii) Conduct a blood lead analysis at a health care provider's office subject to licensing, certification, and approval by the Laboratories Administration of the Maryland Department of Health; or
- (b) Order a blood specimen to be drawn by a third-party health care provider, by either venous or capillary methodology, and send it to a medical laboratory for blood lead analysis.
- (3) "Department" means the Maryland Department of the Environment.
- (4) "Health care provider" has the meaning stated in COMAR 10.11.04.02B.
- (5) "Laboratory" means a medical laboratory as defined in COMAR 10.10.01.03B.
- (6) "Local health department" means the health department of the Maryland subdivision where the patient resides.
- (7) "Parent or guardian" means an individual acting in a primary custodial capacity.
- (8) "Reference level" means:
 - (a) 5 micrograms per deciliter; or
 - (b) Beginning 1 year after the date that the Centers for Disease Control and Prevention revises the blood lead reference level until 1 year after a subsequent revision, the revised blood lead reference level as determined by the Centers for Disease Control and Prevention.

.02 Information to be Reported.

A. *Who Shall Report.* The laboratory, health care provider's office, or other facility that draws a blood specimen from a child 18 years old or younger for a blood lead level test shall obtain the information required by §D(1)—(5) and (8) of this regulation at the time of drawing the blood specimen.

B. *Time and Method for Reporting by a Facility that Initially Draws a Blood Specimen.*

(1) A laboratory that performs blood lead analysis shall provide a referral form of paper or electronic requisition that specifies the required information for use by a laboratory, a health care provider's office, or another facility that draws a blood specimen.

(2) The facility that draws a blood specimen shall:

- (a) Record the information required under §D(1)—(5) and (8) of this regulation on the laboratory's referral form or similar form; and
- (b) Forward the required information concurrently with the blood specimen to the laboratory that performs blood lead analysis.

C. *Time and Method for Reporting by a Laboratory.* A laboratory required to report a blood lead level test under this regulation shall report the blood lead level test in the format approved by the Department and include all of the information required under §D of this regulation.

D. *The blood lead level test to be reported shall include the following information:*

(1) The child's demographic information, including:

- (a) First name, last name, and middle initial;
- (b) Date of birth, country of birth, sex, race, and ethnicity;
- (c) Medical assistance number if the child is enrolled in Medicaid or the Maryland Children's Health Program;
- (d) Complete home address at the time the blood specimen was drawn, including house or apartment number, street, city or town, county or Baltimore City, zip code, and state;
- (e) Telephone number; and
- (f) Parent or guardian's name;

(2) If the child being tested is female, whether the child was pregnant at the time of the blood lead level test;

(3) Type of blood specimen, venous or capillary, and the blood draw date;

(4) The health care provider's office name, address, telephone number, and national provider identifier (NPI);

(5) If the draw site is different from the health care provider's office, the laboratory's or other facility's name, address, telephone number, and NPI;

(6) All of the following information about the laboratory performing the blood lead analysis:

- (a) Laboratory name, address, telephone number, and clinical laboratory improvement amendment number (CLIA);
- (b) Laboratory method used to analyze the blood specimen;
- (c) The limit of detection for the method used to analyze the blood specimen; and
- (d) If reporting a "no result" test result, the limit of detection for the laboratory;

(7) Blood lead level in micrograms per deciliter expressed with a numeric results comparator of:

(a) Equal, if the blood lead level is an exact measurement; or

(b) Less than or greater than, if a blood lead level reading is below or above a certain level that a device used to analyze a blood specimen can accurately record; and

(8) Additional information as may be required by the Department.

.03 Missing Information.

A. A laboratory that receives a blood specimen from a laboratory, a health care provider's office, or another facility without all of the required information listed in Regulation .02D(1)—(5) and (8) of this chapter included on the referral form required under Regulation .02B of this chapter shall:

(1) Within 3 business days of receipt of the blood specimen, send to the facility that provided the blood specimen a written or electronic message citing the regulations and requirements of this chapter, requesting that all the required missing information be forwarded to the laboratory; and

(2) Upon receipt of the required information, collate and transmit the information to the Department within the time frames set forth in Regulation .04C of this chapter.

B. When the laboratory reports a blood lead level test result to the Department with one or more of the requirements listed in Regulation .02D(1)—(5) and (8) of this chapter omitted, the laboratory shall concurrently provide the name and address of the facility that:

(1) Drew the blood specimen; and

(2) Failed upon request to forward the required information to the laboratory.

C. The facility that drew the blood specimen shall respond to a written or electronic message from a laboratory that did not receive all of the required information listed in Regulation .02D(1)—(5) and (8) of this chapter by providing the information to the laboratory within:

- (1) 1 business day of receiving the message regarding a blood lead level test result of greater than or equal to the reference level; and
- (2) 5 business days of receiving the message for a blood lead level test result of less than the reference level.

D. A laboratory not permitted in accordance with COMAR Title 10 to perform a blood lead analysis that accepts a blood specimen from a health care provider for referral to another laboratory for blood lead analysis shall ensure that:

- (1) The requisition record includes all of the information that is required under Regulation .02D(1)—(5) and (8) of this chapter; and
- (2) The required information is transmitted to the laboratory performing the blood lead analysis along with the blood specimen.

E. Reporting a Blood Lead Level Test Result with Missing Information.

(1) A laboratory shall collate information required under Regulation .02D of this chapter that is collected to complete a previously incomplete requisition record for a blood lead level test before submitting the information to the Department in accordance with §A of this regulation.

(2) A laboratory shall report to the Department the missing information collated pursuant to §E(1) of this regulation:

(a) Concurrently with the blood lead level test result, if the reporting time frame for a blood lead level test result established in Regulation .04C of this chapter has not concluded; or

(b) In a manner indicating that there has been a change in the blood lead level test record, if reporting the missing information after the initial blood lead level test result was reported to the Department.

.04 A Laboratory that Performs the Tests.

A. Reporting to the Department. The director of a laboratory shall report to the Department the result of a blood lead level test performed on a child 18 years old or younger, who resides in Maryland.

B. Additional Reporting Requirements.

(1) In addition to the requirements of §A of this regulation, the director of a laboratory shall report to the Commissioner of the Baltimore City Health Department the result of a blood lead level test performed on a child 18 years old or younger, who resides in Baltimore City.

(2) In addition to the requirements under §§A and B(1) of this regulation, a laboratory shall report the result of a blood lead level test to:

(a) The health care provider that ordered the blood lead level test; and

(b) Another entity as required by State, federal, or local statutes or regulations, or in accordance with accepted standards of practice.

C. A laboratory shall report the result of a blood lead level test to the Department by facsimile or other manner required by the Department within the following time frames:

(1) By the close of business of the next business day following a final blood lead level test result of greater than or equal to the reference level; and

(2) Within 2 weeks of a final blood lead level test result of less than the reference level.

D. A laboratory that uses an electronic system for tracking blood lead level test results shall report a result to the Department electronically in a manner consistent with the technical specifications established by the Department.

.05 Reporting by the Department.

A. Upon receipt of a blood lead level test result, the Department shall report the information required under Regulation .02D of this chapter and the result of a blood lead level test indicating a blood lead level greater than or equal to the reference level to the:

(1) Local health department in the jurisdiction in which the child resides; and

(2) Maryland Department of Health.

B. Time and Manner of Reporting by the Department.

(1) The Department shall report a blood lead level test result of:

(a) Greater than or equal to 10 micrograms per deciliter by the close of business of the next business day following the receipt of the final test result; and

(b) 5 micrograms per deciliter through 9 micrograms per deciliter within 2 weeks of the receipt of the final test result.

(2) The Department may report the information required under Regulation .02D of this chapter and the result of a blood lead level test indicating a blood lead level of less than 5 micrograms per deciliter to the local health department or the Maryland Department of Health, or both.

26.02.07 Procedures for Abating Lead Containing Substances from Buildings

Authority: Environment Article, §§1-404 and 7-206—7-208, Annotated Code of Maryland

.02 Definitions.

A. (text unchanged)

B. Terms Defined.

(1)—(11) (text unchanged)

(12) “Quantitation limit” means the minimum quantity or level of lead that can reliably be measured or quantified to a specified degree of accuracy and precision.

[(12)] (13)—[(13)] (14) (text unchanged)

.12 Procedures for Determining Compliance.

A.—H. (text unchanged)

[I. All dust samples collected under §H shall be analyzed for extractable lead by:

(1) The Maryland Department of Health, State Laboratories Administration; or

(2) A laboratory approved by the Maryland Department of the Environment to perform the analysis.]

I. The Department shall submit a dust sample collected under §H of this regulation for extractable lead analysis to a laboratory:

(1) Recognized by the U.S. Environmental Protection Agency under 15 U.S.C. §2685(b) as accredited under the National Lead Laboratory Accreditation Program; and

(2) That demonstrates it can achieve a quantitation limit equal to or less than 50 percent of the lowest lead dust level specified in §K(1) of this regulation.

J. (text unchanged)

K. [A lead abatement project shall be deemed to be in compliance with these regulations if] *The Department shall consider a lead abatement project to be in compliance with this chapter if:*

(1) Floor lead dust levels are [below 40] *less than 10* micrograms per square foot;

(2) [Windowsill] *Window sill* lead dust levels are [below 250] *less than 100* micrograms per square foot;

(3) Window well lead dust levels are [below 400] *less than 100* micrograms per square foot; and

(4) (text unchanged)

L. (text unchanged)

Subtitle 16 LEAD

26.16.01 Accreditation and Training for Lead Paint Abatement Services

Authority: Environment Article, §§1-404, 6-818, 6-851, 6-852, 6-1001—6-1005, and 7-206—7-208, Annotated Code of Maryland

.02 Definitions.

A. (text unchanged)

B. Terms Defined.

(1)—(2) (text unchanged)

(3) “Child care center” [means a child care center as defined under COMAR 07.04.02] *has the meaning stated in COMAR 13A.16.01.02B.*

(4)—(27) (text unchanged)

26.16.02 Reduction of Lead Risk in Housing

Authority: Environment Article, §§1-404, 6-801—6-852, and 6-1001—6-1005, Annotated Code of Maryland

.02 Definitions.

A. (text unchanged)

B. Terms Defined.

(1)—(5) (text unchanged)

(6) “Lead-contaminated dust” means dust with a lead content equal to or greater than:

(a) [40] *10* micrograms per square foot in dust collected from a floor;

(b) [250] *100* micrograms per square foot in dust collected from a window sill; or

(c) [400] *100* micrograms per square foot in dust collected from a window well.

(7)—(14) (text unchanged)

.02-1 Incorporation by Reference.

[The U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (June 1995 edition), Chapter 7: Lead-Based Paint Inspection (1997 Revision) is incorporated by reference.] *The U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Second Edition, July, 2012), Chapter 7: Lead-Based Paint Inspection is incorporated by reference.*

.05 Certification of Housing as Lead-Free.

A.—C. (text unchanged)

D. An affected property that is a multiunit building or multibuilding complex having ten or more dwelling units may be certified to be lead-free based on testing of less than all dwelling units, common areas, and exterior surfaces if:

(1)—(2) (text unchanged)

(3) The determination of the minimum number of dwelling units, common areas, and exterior surfaces to be tested is in accordance with [Table 7.3: Number of Units to be Tested in Multifamily Developments, found in the U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing, Chapter 7; Lead-Based Paint Inspection (1997 Revision)] *Table 7.3: Number of Units to be Tested in Multi-family Building or Developments, found in the U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Second Edition, July, 2012), Chapter 7: Lead-Based Paint Inspection;*

(4)—(5) (text unchanged)

E.—M. (text unchanged)

26.16.05 Procedures for Performing Lead *Paint* Abatement Services

Authority: Environment Article, §§1-404, 6-801—6-852, 6-1001—6-1005, and 7-206—7-208, Annotated Code of Maryland

.01 Scope and Applicability.

A. This chapter governs the performance of lead paint abatement services in Maryland.

B. A person performing [any] *a* lead inspection, lead risk assessment, or clearance inspection shall:

(1) [be] *Be* accredited by the Department; and

(2) [shall comply] *Comply* with the applicable procedures in this chapter.

C. [Inspections performed as part of a poisoned-child investigation shall be performed according to protocols approved by the Department before the performance of the inspection] *A lead paint risk assessor shall perform an inspection for a poisoned-child investigation in accordance with the*

environmental investigation protocols specified in COMAR 26.16.08.

.02 Definitions.

- A. (text unchanged)
- B. Terms Defined.
 - (1) (text unchanged)
 - (2) “Quantitation limit” has the meaning stated in COMAR 26.02.07.02B.
 - [(2)] (3) (text unchanged)

.03 Incorporation by Reference.

In this chapter, the following documents are incorporated by reference:

- A. 40 CFR §745.227, as amended; [and]
- B. [Standard Practice for Collection of Settled Dust Samples Using Wipe Sampling Methods for Subsequent Lead Determination (ASTM Standard E1728, 2016 Edition).] *Standard Practice for Collection of Settled Dust Samples Using Wipe Sampling Methods for Subsequent Lead Determination (ASTM Standard E1728/E1728M-20, 2020 Edition); and*
- C. *Standard Specification for Wipe Sampling Materials for Lead in Surface Dust (ASTM Standard E1792-03, Reapproved 2016).*

.10 Clearance Inspections for Abatement Projects.

- A. Following a lead abatement project, performed in accordance with COMAR 26.02.07, a [clearance inspection for lead-contaminated dust shall be performed by a] *lead paint* visual inspector, inspector technician, or risk assessor accredited by the Department *shall perform a clearance inspection for lead-contaminated dust to determine if the lead content in dust is less than the levels stated in COMAR 26.16.02.02B.*
- B. [Dust samples shall be collected] *A Department-accredited lead paint visual inspector, inspector technician, or risk assessor shall collect dust samples from each interior room where lead abatement was performed, using all of the dust sample collection procedures specified in Regulation [.08B] .09 of this chapter.*
- C.—D. (text unchanged)

.12 Collection and Laboratory Analysis of Samples.

- A. (text unchanged)
- B. [Any paint chip, dust, or soil samples collected under the procedures contained in this chapter shall be collected by persons accredited by the Department as an inspector technician, visual inspector, or risk assessor employed by a State-accredited contractor] *A person that collects a paint chip, dust, or soil sample in accordance with the procedures contained in this chapter shall be accredited by the Department as a lead paint inspector technician, visual inspector, or risk assessor and employed by a Department-accredited contractor.*
- C. [All samples collected shall be analyzed by a laboratory recognized by EPA under §405 (B) of TSCA as being capable of performing analyses for lead compounds in paint chip, dust, or soil samples] *A lead paint inspector technician, visual inspector, or risk assessor shall submit a collected sample for analysis to a laboratory:*
 - (1) *Recognized by the U.S. Environmental Protection Agency under 15 U.S.C. §2685(b) as accredited under the National Lead Laboratory Accreditation Program; and*
 - (2) *That demonstrates it can achieve a quantitation limit equal to or less than:*
 - (a) *20 percent of the lowest level of lead content in paint that constitutes a lead-containing substance, as stated in COMAR 26.16.01.02B;*
 - (b) *20 percent of the lowest action level or regulatory limit for lead content in soil established under 40 CFR §745.65(c) or a more stringent standard published by the Department; or*
 - (c) *50 percent of the lowest level of lead content in dust that constitutes lead-contaminated dust, as stated in COMAR 26.16.02.02B.*

26.16.08 Environmental Investigations

Authority: Environment Article, §§6-304, 6-305, 6-801, 6-819, 6-846, and 6-1001—6-1005, Annotated Code of Maryland

.01 Purpose.

The purpose of this chapter is to establish the:

- A. *Procedures and technical standards for conducting an environmental investigation; and*
- B. *Job performance standards for a Department-accredited lead paint risk assessor conducting an environmental investigation.*

.02 Scope.

- A. *This chapter applies to an environmental investigation performed pursuant to Environment Article, §6-305, Annotated Code of Maryland.*
- B. *This chapter does not apply to the performance of a lead paint abatement service other than an environmental investigation required under Environment Article, §6-305, Annotated Code of Maryland.*

.03 Definitions.

A. *In this chapter, the following terms have the meanings as indicated.*

B. *Terms Defined.*

- (1) *“Accredited” has the meaning stated in COMAR 26.16.02.02B.*
- (2) *“Affected property” has the meaning stated in Environment Article, §6-801(b), Annotated Code of Maryland.*
- (3) *“ASTM” means the American Society for Testing and Materials.*
- (4) *“Blood lead level (BLL)” means a measurement of the amount of lead in blood, usually measured in micrograms per deciliter.*
- (5) *“Caregiver” means a parent, a guardian, or another person that is legally responsible for the wellbeing of a pregnant woman younger than 18 years old or a child.*
- (6) *“Child” means an individual younger than 6 years old.*

- (7) "Child care center" has the meaning stated in COMAR 13A.16.01.02B.
- (8) "Defect" means the presence of:
- (a) Chipping, peeling, or flaking paint on an interior or exterior surface of an affected property; or
 - (b) A structural defect causing chipping, peeling, or flaking paint in an affected property.
- (9) "Deteriorated paint" means chipping, peeling, or flaking paint on:
- (a) A painted interior or exterior surface of a property; or
 - (b) Any other accessible painted surface.
- (10) "Drip line" means the area of land directly beneath the edge of a roof.
- (11) "Elevated blood lead (EBL)" has the meaning stated in Environment Article, §6-801(f), Annotated Code of Maryland.
- (12) Environmental Investigation.
- (a) "Environmental investigation" means an investigation performed by a Department-accredited lead paint risk assessor to identify one or more lead hazards for a child or pregnant woman diagnosed with EBL.
- (b) "Environmental investigation" includes the:
- (i) Administration of an environmental questionnaire, a visual inspection, and the collection of environmental samples during an on-site assessment of a property;
 - (ii) Analysis of the results from an on-site assessment and environmental sampling; and
 - (iii) Performance of case management by the Department or a local health department pursuant to Environment Article, §6-304, Annotated Code of Maryland.
- (13) "Environmental questionnaire" means a questionnaire administered by a Department-accredited lead paint risk assessor during an environmental investigation to identify one or more lead exposure risk factors that may have contributed to a child's or pregnant woman's EBL.
- (14) "Environmental sampling" means the collection and analysis of paint chip, dust, or soil samples, or samples from other media as appropriate, to identify the presence of a lead hazard, performed in accordance with the applicable sampling requirements and technical standards described under Regulations .06 and .07 of this chapter.
- (15) Friction Surface.
- (a) "Friction surface" means an interior or exterior surface subject to abrasion or friction.
- (b) "Friction surface" may include, but is not limited to, a window sash, a stair tread, or another surface subject to abrasion or friction.
- (16) "HUD Guidelines" means the U.S. Department of Housing and Urban Development (HUD) Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing, Second Edition, July, 2012.
- (17) Impact Surface.
- (a) "Impact surface" means an interior or exterior surface subject to damage by repeated impact or contact.
- (b) "Impact surface" may include, but is not limited to, a door frame, a surface that makes contact with a knob or handle, or another surface subject to damage by repeated impact or contact.
- (18) "International Organization for Standardization/International Electrotechnical Commission (ISO/IEC)" means a technical standard governed by both the ISO and IEC.
- (19) Lead Hazard.
- (a) "Lead hazard" means a source of lead on an accessible surface or media in which exposure of a child or pregnant woman to the source would result in adverse human health effects.
- (b) "Lead hazard" includes, but is not limited to:
- (i) Lead-based paint as defined under COMAR 26.16.02.02B, if the lead-based paint is present on, or within a layer of, a surface with deteriorated paint or a defect, an impact or friction surface, or a chewable surface with evidence of teeth marks;
 - (ii) A lead-containing substance as defined under COMAR 26.16.01.02B, if the lead-containing substance is present on an impact or friction surface, or chewable surface with evidence of teeth marks;
 - (iii) Lead-contaminated dust as defined under COMAR 26.16.02.02B; or
 - (iv) Other sources of lead as identified in the HUD Guidelines, Chapter 16: Investigation and Treatment of Dwellings that House Children with Elevated Blood Lead Levels, or by the Department.
- (20) "Notice of Defect" means a written notice provided by a tenant, or another source, to the owner of an affected property notifying the owner of a defect in the affected property, as authorized under Environment Article, §6-819, Annotated Code of Maryland.
- (21) "Primary residence" means a residential property where a child or pregnant woman with EBL resides.
- (22) "Quantitation limit" has the meaning stated in COMAR 26.02.07.02B.
- (23) "Reference level" means:
- (a) 5 micrograms per deciliter; or
 - (b) Beginning 1 year after the date that the Centers for Disease Control and Prevention revises the blood lead reference level until 1 year after a subsequent revision, the revised blood lead reference level as determined by the Centers for Disease Control and Prevention.
- (24) Secondary Property.
- (a) "Secondary property" means a property, other than a child's or pregnant woman's primary residence, where the child or pregnant woman with EBL spends at least 24 hours per week.
- (b) "Secondary property" includes a child care center or a family member's residence.
- (25) "Secondary source" means a lead exposure risk that is not derived from a painted surface or structural component of a property, including, but not limited to:
- (a) Tap water;
 - (b) A toy, jewelry, or ceramic foodware;
 - (c) An imported cosmetic, such as, but not limited to, a product identified in Table 16.4 of the HUD Guidelines, Chapter 16: Investigation and Treatment of Dwellings that House Children with Elevated Blood Lead Levels;
 - (d) A traditional medicine or remedy; or
 - (e) A food item.

(26) "XRF" has the meaning stated in COMAR 26.16.01.02B.

.04 Incorporation by Reference.

A. In this chapter, the following documents are incorporated by reference:

- (1) General requirements for the competence of testing and calibration laboratories (ISO/IEC 17025:2017(E));
- (2) The U.S. Department of Housing and Urban Development Guidelines for the Evaluation and Control of Lead-Based Paint Hazards in Housing (Second Edition, July, 2012), Chapter 16: Investigation and Treatment of Dwellings that House Children with Elevated Blood Lead Levels;
- (3) Standard Practice for Collection of Settled Dust Samples Using Wipe Sampling Methods for Subsequent Lead Determination (ASTM Standard E1728/E1728M-20, 2020 Edition);
- (4) Standard Practice for Field Collection of Dried Paint Samples for Subsequent Lead Determination (ASTM E1729-16, 2016 Edition); and
- (5) Standard Practice for Field Collection of Soil Samples for Subsequent Lead Determination (ASTM E1727-16, 2016 Edition).

B. The document incorporated by reference in §A(2) of this regulation will be referred to in this chapter as HUD Guidelines, Chapter 16.

.05 Scheduling an Environmental Investigation.

A. Pursuant to Environment Article, §6-304, Annotated Code of Maryland, after the receipt by the Department of a blood lead level test result that diagnoses a child or pregnant woman with EBL, the Department or local health department shall:

- (1) Not more than 10 business days after the receipt of the blood lead level test result, provide notification of the EBL level to:
 - (a) The caregiver of the child or the pregnant woman; and
 - (b) If the child or pregnant woman resides at a property not owned by the caregiver or pregnant woman, the owner of the property where the child or pregnant woman resides; and
- (2) Except as otherwise provided in §D of this regulation, contact the caregiver or pregnant woman to schedule the on-site assessment portion of the environmental investigation.

B. The lead paint risk assessor or local health department representative:

- (1) Shall schedule an on-site assessment for the primary residence of the child or pregnant woman diagnosed with EBL in accordance with the procedures under §C of this regulation; and
- (2) If determined necessary by the lead paint risk assessor while conducting the environmental investigation, may schedule an on-site assessment for a secondary property through coordination with the caregiver or pregnant woman.

C. Procedures for Scheduling an On-Site Assessment.

- (1) The on-site assessment of a primary residence may be scheduled by the lead paint risk assessor or local health department representative in coordination with a local health department representative's home visit.
- (2) The lead paint risk assessor or local health department representative shall make at least two attempts to contact the caregiver or pregnant woman by telephone to schedule an on-site assessment.
- (3) If the lead paint risk assessor or local health department representative is unable to establish contact with the caregiver or pregnant woman in accordance with §C(2) of this regulation, the lead paint risk assessor or local health department representative shall mail a letter through first-class mail to the caregiver or pregnant woman.
- (4) The lead paint risk assessor or local health department representative shall include, at a minimum, all of the following information in the letter required under §C(3) of this regulation:
 - (a) The lead paint risk assessor's or local health department representative's intention to schedule an on-site assessment of the primary residence of the child or pregnant woman with EBL;
 - (b) Notice that the letter constitutes the final attempt by the lead paint risk assessor or local health department representative to schedule the on-site assessment of the primary residence;
 - (c) The latest calendar date that the caregiver or pregnant woman may contact the lead paint risk assessor or local health department representative to schedule an on-site assessment of the primary residence;
 - (d) Notice that failure to contact the lead paint risk assessor or local health department representative to schedule an on-site assessment of the primary residence may result in the child's or pregnant woman's case being closed by the Department or local health department without an environmental investigation; and
 - (e) If the child or pregnant woman is known or believed by the Department or local health department to reside at an affected property, information regarding the tenant's rights under Environment Article, §§6-815 and 6-819, Annotated Code of Maryland.

D. Failure to Schedule an On-Site Assessment.

- (1) If the caregiver or pregnant woman does not respond to the attempts to schedule the on-site assessment of a primary residence made in accordance with §C of this regulation, the Department or local health department may:
 - (a) Attempt to make contact with the caregiver or pregnant woman by coordinating with the medical provider or through other means; or
 - (b) At its discretion, close the case without conducting an environmental investigation.
- (2) If a case is closed by the Department or local health department pursuant to §D(1) of this regulation, the Department or local health department:
 - (a) If the primary residence is not owned by the caregiver or pregnant woman, shall mail a letter through first-class mail to the property owner advising that the:
 - (i) Lead paint risk assessor or local health department representative was unable to contact the caregiver or pregnant woman to schedule an on-site assessment of the property; and
 - (ii) Case has been closed by the Department or local health department without conducting an environmental investigation; and
 - (b) May reopen the case and conduct an environmental investigation upon request of the caregiver or pregnant woman.
- (3) If the lead paint risk assessor or local health department representative, in accordance with §B(2) of this regulation, is unable to schedule an on-site assessment for a secondary property, the lead paint risk assessor shall:
 - (a) Complete the environmental investigation including only the primary residence; and
 - (b) Note in the environmental investigation report that the secondary property was not assessed.

.06 Environmental Investigation Protocol.

A. Except as otherwise provided in Regulation .05D of this chapter, a lead paint risk assessor shall perform an environmental investigation in response to a child's or pregnant woman's diagnosis of EBL, as required under Environment Article, §6-305, Annotated Code of Maryland.

B. The lead paint risk assessor shall determine the year of construction for the property being investigated, which may be accomplished by viewing the property tax records available through the State Department of Assessment and Taxation.

C. Environmental Questionnaire.

(1) The lead paint risk assessor shall complete an environmental questionnaire with the caregiver or pregnant woman during an on-site assessment of a primary residence.

(2) The lead paint risk assessor shall complete the environmental questionnaire on a form provided by the Department that is consistent with or more detailed than Form 16.1 of the HUD Guidelines, Chapter 16.

(3) The lead paint risk assessor shall use the environmental questionnaire to:

(a) Identify a potential lead hazard for a child or pregnant woman, including:

(i) Behavioral, cultural, hobby, housing, or occupational lead exposure risk factors; and

(ii) Less common sources of lead exposure as identified in Table 16.4 of the HUD Guidelines, Chapter 16;

(b) Determine the type of environmental sampling to be conducted during the on-site assessment; and

(c) Identify whether there is a secondary property that requires an on-site assessment.

D. A lead paint risk assessor shall perform a visual inspection to identify the potential presence of a lead hazard.

E. Paint Survey Analysis.

(1) A lead paint risk assessor shall perform a paint survey analysis to determine if the lead content on a painted surface meets the definition of lead-based paint under COMAR 26.16.02.02B through paint chip or XRF sampling in accordance with the requirements under Regulation .07D or E of this chapter.

(2) A lead paint risk assessor shall perform a paint survey analysis:

(a) On a painted chewable surface or suspected lead-containing substance with evidence of teeth marks;

(b) At a property constructed before 1978 if an interior or exterior painted surface has:

(i) A defect or deteriorated paint;

(ii) Intact paint and the surface is subject to friction or impact; or

(iii) Been disturbed during a recent renovation or in preparation to be repainted; or

(c) At a property constructed after 1977 on an interior or exterior painted surface that has:

(i) Deteriorated paint;

(ii) Intact paint and the surface is subject to friction or impact; or

(iii) Been identified as a potential lead hazard through the environmental questionnaire, painting history of the property, or by the lead paint risk assessor.

F. A lead paint risk assessor shall perform dust wipe sampling:

(1) To determine if the lead content in dust on a floor, window sill, or window well meets the definition of lead-contaminated dust in COMAR 26.16.02.02B;

(2) Pursuant to the protocol in the HUD Guidelines, Chapter 16;

(3) Based on information obtained by the lead paint risk assessor while conducting the environmental questionnaire and visual inspection; and

(4) In accordance with the requirements under Regulation .07C of this chapter.

G. A lead paint risk assessor shall perform composite soil sampling:

(1) On an area of bare soil at a primary residence or secondary property where a child or pregnant woman frequents, including a drip line, a play area, or another area at a property;

(2) To identify if the bare soil present at a primary residence or secondary property meets the definition of a soil-lead hazard, as defined under 40 CFR §745.65(c) or a more stringent standard published by the Department; and

(3) In accordance with the requirements under Regulation .07F of this chapter.

H. Tap Water Sampling.

(1) Tap water sampling may be performed:

(a) By a lead paint risk assessor collecting a tap water sample or through coordination with a local health department;

(b) If tap water is identified as being commonly used as drinking water or in the preparation of infant formula or food; and

(c) To determine if the lead content in tap water exceeds the action level described on page 16-14 in the HUD Guidelines, Chapter 16.

(2) If a tap water sample is collected by a lead paint risk assessor pursuant to §H(1) of this regulation, the lead paint risk assessor shall perform the tap water sampling in accordance with the requirements under Regulation .07G of this chapter.

I. A lead paint risk assessor may perform additional environmental sampling of a secondary source:

(1) With the permission of the caregiver or pregnant woman;

(2) If identified as a potential source of lead exposure by the lead paint risk assessor;

(3) To determine if the lead content in the secondary source meets the definition of a lead hazard under Regulation .02B of this chapter; and

(4) In accordance with the requirements under Regulation .07H of this chapter.

J. A lead paint risk assessor shall interpret the results of environmental sampling performed during an environmental investigation.

.07 Technical Standards for Environmental Sampling.

A. A lead paint risk assessor shall perform environmental sampling in accordance with the technical standards and environmental sampling requirements set forth in this regulation.

B. A lead paint risk assessor shall submit a paint chip, soil, or dust wipe sample for analysis to a laboratory:

(1) Recognized by the U.S. Environmental Protection Agency under 15 U.S.C. §2685(b) as accredited under the National Lead Laboratory Accreditation Program; and

(2) That demonstrates it can achieve a quantitation limit equal to or less than:

- (a) 20 percent of the lowest level of lead content in paint that constitutes a lead-containing substance, as stated in COMAR 26.16.01.02B;
 - (b) 20 percent of the lowest action level or regulatory limit for lead content in soil established under 40 CFR §745.65(c) or a more stringent standard published by the Department; or
 - (c) 50 percent of the lowest level of lead content in dust that constitutes lead-contaminated dust, as stated in COMAR 26.16.02.02B.
- C. A lead paint risk assessor shall perform dust wipe sampling in accordance with the ASTM E1728/E1728M-20 standard.
- D. A lead paint risk assessor shall perform XRF sampling on a painted surface using a calibrated instrument in accordance with COMAR 26.16.05.06B and the ISO/IEC 17025:2017(E) standard.
- E. A lead paint risk assessor shall perform paint chip sampling:
- (1) Only on a surface with deteriorated paint or a defect, or other painted surface as determined necessary by the lead paint risk assessor;
 - (2) After a dust wipe sample is collected to prevent cross-contamination of dust present on a surface near the area where the paint chip was sampled; and
 - (3) In accordance with the ASTM E1729-16 standard and COMAR 26.16.05.06C.
- F. A lead paint risk assessor shall perform composite soil sampling in accordance with the ASTM E1727-16 standard.
- G. If a tap water sample is collected by a lead paint risk assessor, the lead paint risk assessor shall submit the tap water sample to a laboratory certified by the Department to analyze drinking water samples for lead.
- H. A lead paint risk assessor shall perform the sampling of a secondary source using:
- (1) An environmental sampling method appropriate to detect lead content in the secondary source; or
 - (2) XRF sampling, using a calibrated instrument in accordance with COMAR 26.16.05.06B and the ISO/IEC 17025:2017(E) standard.

.08 Environmental Investigation Report.

- A. Pursuant to the provisions of Environment Article, §6-819, Annotated Code of Maryland, if the property being investigated is an affected property with a defect observed during an on-site assessment:
- (1) The lead paint risk assessor shall issue a Notice of Defect to the owner of the affected property; and
 - (2) The property owner shall satisfy the modified risk reduction standard within 30 days of receiving the Notice of Defect from the lead paint risk assessor.
- B. A lead paint risk assessor shall prepare an environmental investigation report that includes the following information:
- (1) Identification of lead hazards in the property subject to the environmental investigation;
 - (2) Recommendations of immediate actions the caregiver, pregnant woman, or property owner can take to reduce the child's or pregnant woman's further exposure to lead; and
 - (3) Recommendations designed to eliminate a child's or pregnant woman's exposure to lead through:
 - (a) One or more lead hazard reduction treatments or an abatement performed by a lead paint abatement services provider accredited by the Department under COMAR 26.16.01, and in accordance with the abatement of lead-containing substances protocols under COMAR 26.02.07; or
 - (b) Discontinued use of a secondary source that poses a lead hazard to the child or pregnant woman.
- C. The lead paint risk assessor shall provide a copy of the environmental investigation report to:
- (1) The caregiver or pregnant woman;
 - (2) If different than the caregiver or pregnant woman, the owner of the property subject to the environmental investigation; and
 - (3) At the discretion of the Department or local health department, the health officer in the county where the environmental investigation was performed.

BENJAMIN H. GRUMBLES
Secretary of the Environment