

Association of Metropolitan Sewerage Agencies

TESTIMONY OF THE

ASSOCIATION OF METROPOLITAN SEWERAGE AGENCIES (AMSA)

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Presented by

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Testimony of Norman LeBlanc Chief, Technical Services, Hampton Roads Sanitation District on behalf of the Association of Metropolitan Sewerage Agencies

Good afternoon Chairman Burton, Congresswoman Watson and members of the Subcommittee, my name is Norm LeBlanc. I am Chief of Technical Services for the Hampton Roads Sanitation District, in Virginia Beach, Virginia and Chair of the Association of Metropolitan Sewerage Agencies' (AMSA) Water Quality Committee. AMSA represents the interests of nearly 300 of the nation's wastewater treatment agencies, also known as publicly owned treatment works or POTWs. AMSA members serve the majority of the sewered population in the United States.

Thank you for the opportunity to present AMSA's perspective on this very important issue.

Mr. Chairman, mercury is a multi-media problem that AMSA believes demands a multi-media, multi-faceted solution. Only a coordinated effort involving all levels of government, federal, state, and local, will be able to address the mercury problem as a whole and be able to ensure that the resources being applied to control mercury across the nation have a real impact on improving the environment

and protecting public health. AMSA, therefore, continues to support legislation that would create a national task force or some other type of inter-agency working group to evaluate the issues surrounding mercury in the environment and coordinate efforts to control it.

With that said, AMSA strongly believes that each wastewater treatment agency and the community they serve should have ultimate control over the approach used to reduce mercury discharges from dental offices. I hope my remarks today will provide you with added insight into what the nation's POTWs are already doing to address this issue.

The U.S. Environmental Protection Agency's 1997 *Report to Congress* on mercury demonstrated that when compared to all other sources of mercury released to the environment, wastewater treatment facilities are a minor or *de minimis* source.

Despite their *de minimis* contribution, wastewater treatment agencies continue to receive stringent numeric limits for mercury in their wastewater discharge permits and many are experiencing difficulties in complying with these new limits.

I want to be clear that POTWs want to do their part in reducing mercury releases to the environment. But, it is important to recognize that wastewater treatment plants are not designed to remove toxics like mercury. In fact, the Clean Water Act, in requiring us to implement pretreatment programs, recognizes that it is not only good public policy but also good engineering practice to remove toxics at the source and not at the wastewater treatment plant. A well-run pretreatment program is a POTW's first and primarily its only line of defense against toxic discharges and is critical for reducing mercury concentrations in wastewater discharged to the environment.

Although residential sources of mercury, such as human waste and household products, are significant, POTWs have absolutely no authority to control these sources. Dental office mercury, which makes up approximately 40% of the mercury coming into a wastewater treatment plant according to a March 2002 AMSA study and a recent American Dental Association report, is controllable. Consequently, dental offices will almost always be a component of pretreatment efforts to control mercury in order to meet permit limits.

Pretreatment programs can approach the issue of dental office mercury control in many different ways, and AMSA believes that each community will choose the approach that works best for it. While some communities have chosen to approach the issue using voluntary, best management practices that dental offices are asked

to implement, other communities are requiring dental offices to install equipment, such as amalgam separators, to remove the mercury contained in amalgam fillings before it has a chance to enter the sewer system.

There are success stories for each type of approach where reductions have been made in the amount of mercury being discharged to the wastewater treatment plant. In most communities, it is too early to tell whether or not long-term implementation of these programs will achieve the low levels of mercury necessary to meet increasingly stringent permit limits, but preliminary indications are that they will not.

More work is needed to evaluate the options available for controlling the amount of mercury entering POTWs and AMSA has recently begun a new, international study to evaluate the effectiveness of amalgam separators at reducing the mercury load from dental offices. This project, however, will not be completed until 2005. AMSA's 2002 Study on the effectiveness of pollution prevention and/or source control at reducing mercury discharged to a wastewater treatment plant does suggest that pollution prevention efforts alone, without the use of amalgam separators for example, will not enable POTWs to meet stringent permit limits.

AMSA recently had the opportunity to peer review an American Dental Association (ADA) assessment of the quantity of mercury nationwide that finds its way into the environment from dental offices. While our review of the final report is still ongoing, I can tell you that many of AMSA's comments on the draft report were addressed in the final document. Nevertheless, some broader issues remain that we feel the final report could have addressed better, and AMSA will be providing additional comment to the ADA on those issues.

The nation's wastewater treatment agencies continue to do their best to minimize the discharge of mercury to their plants, and subsequently the environment, from all potential, controllable sources, including dental offices. It is important that we have the ability to control all commercial and industrial sources of mercury if we are to have any chance of meeting current and future requirements. However, we do not want to mislead the Subcommittee into believing that controlling dental offices will result in attainment of Clean Water Act Requirements at all POTWs.

AMSA looks forward to working with you and your colleagues as well as the national and state dental associations on mercury issues and appreciates the opportunity to provide our expertise on mercury to the Subcommittee. At this time, I will be happy to answer any questions.