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PREPARED STATEMENT

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REGARDING

PER- AND POLYFLUOROALKYL SUBSTANCES (PFAS) UPDATE

BEFORE THE

HOUSE ARMED SERVICES COMMITTEE

READINESS SUBCOMMITTEE

September 15, 2020

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Chairman Garamendi, Ranking Member Lamborn, and members of the Committee, thank you for the opportunity to testify before the subcommittee today.

The Department's top priority is the health and safety of our personnel at home and abroad. We support the Department's PFAS efforts through public, environmental, and occupational health expertise and activities.

The Department collaborates with and relies on the Centers for Disease Control and Prevention (CDC) for development of occupational health guidance (National Institute for Occupational Safety and Health (NIOSH)) and public health guidance (Agency for Toxic Substances and Disease Registry (ATSDR)). Over the last several years, ATSDR has been conducting environmental assessments and public health studies associated with PFAS-impacted drinking water and other sources of PFAS exposures. The Department also uses the integration of toxicology, uptake and depuration, and fate-and-transport work of the U.S. Environmental Protection Agency, U.S. Department of Agriculture, and the U.S. Food and Drug Administration, and will look to findings and recommendations from the upcoming health- and exposure-related work by the National Academy of Science, Engineering, and Medicine (NASEM) for guidance when published. Over the next few years, as these science-based efforts are finalized, a better understanding of those at risk and potential environmental impacts from exposures to PFAS will emerge. The science-based efforts may inform what people and wildlife are being exposed, to how much, for how long, and what health effects are associated with these exposures.

The Department continues to look at the number of potentially exposed Armed Forces members and veterans who consumed PFAS-impacted drinking water on military installations. The Department will rely on ATSDR and other public health groups over the next few years to assist in focusing this effort. The Department will work with NIOSH to refine the evaluation of

occupational exposures to PFAS, such as Military firefighters who work with Aqueous Film Forming Foam (AFFF) and wear turnout gear.

As part of National Defense Authorization Act for Fiscal Year 2020, Section 707, the Department is prepared to offer and provide blood testing to determine and document potential exposure to PFAS for each DoD firefighter during their annual physical exam beginning October 2020.

Active duty, Reserve, National Guard, and DoD civilian firefighters were identified through coordination with the Military Departments and DoD Agencies using job series, position description, and military occupational specialty titles for assessment and testing. Since conducting a blood test for PFAS is not routine, the Department coordinated with the CDC and Defense laboratorians to identify appropriate laboratories for testing. Identification of the appropriate laboratory was based on its capabilities and experience in analyzing PFAS, and capacity to analyze the approximately 20,000+ samples (one for each firefighter) from October 1, 2020 through September 30, 2021. Each firefighter's individual results will be added to their occupational medical records.

The Department also worked with our interagency partners to develop fact sheets for occupational medicine physicians and firefighters, and a letter template that will be provided to each firefighter with their individual results. As indicated by ATSDR, most of the U.S. population has some level of PFAS in their blood. With regard to interpretation of results, ATSDR clinical guidance indicates that "there are no health-based screening levels for specific PFAS that clinicians can compare to concentrations measured in blood samples. As a result, interpretation of measured PFAS concentrations in individuals is limited in its use."

I am grateful for the opportunity to provide further detail on our PFAS-related efforts to ensure the safety of our military members, civilian workforce, their families, and our Military Health System beneficiaries. Thank you to the members of this Committee for your commitment to the men and women of our Armed Forces, and the families who support them.