



January 13, 2026

The Honorable Danilo Burgos  
Chairman  
House Consumer Protection,  
Technology & Utilities  
P.O. Box 202197  
Harrisburg, PA 17120-2197

The Honorable Carl Metzgar  
Chairman  
House Consumer Protection,  
Technology & Utilities  
P.O. Box 202069  
Harrisburg, PA 17120-2069

RE: **House Bill 2085 – Legionnaires Disease Risk Management**

Dear Chairs:

The Pennsylvania-Section, American Water Works Association (PA-AWWA) consists of 1,600 + members representing all classes of water utilities in Pennsylvania, including those PUC regulated, authorities, and municipalities, plus regulators, vendors, contractors, engineers, and others dedicated to promoting the health and welfare of Pennsylvania by providing affordable drinking water of superior quality and sufficient quantity. The Water Utility Council of PA-AWWA (WUC) includes representatives from the National Association of Water Companies, Pennsylvania Chapter; Pennsylvania Municipal Authorities Association; Pennsylvania Rural Water Association; and Water Works Operators' Association of Pennsylvania.

The WUC **opposes** House Bill 2085 (Smith-Wade-El-D), which was referred to House Consumer Protection, Technology and Utilities, December 9, 2025. ***Drinking water regulations should not be undertaken outside of the scientific process established under the federal Safe Drinking Water Act (SDWA) and mandating maximum contaminant levels (MCLs) or disinfectant residuals is not something that should be undertaken through legislation.***

### **Review of House Bill 2085**

[House Bill 2085](#) (Smith-Wade-D) amends Title 27 (Environmental Resources), providing for Legionnaires' disease risk management; establishing the Legionnaires' Disease Awareness Fund; and imposing duties on the Department of Environmental Protection and the Department of Health.

This legislation requires the Department of Environmental Protection (DEP), in consultation with the Department of Health, to promulgate rules and regulations establishing requirements for public water systems with more than 100 service connections to discourage and minimize growth and potential distribution of pathogens such as *Legionella* bacteria in the water system and shall include:

- (1) Criteria to be used by public water systems to develop distribution system maintenance plans, including frequency of required disinfectant residual monitoring.
- (2) Requirements for a public water system to certify its distribution system maintenance plan and provide the plan to the department upon request.
- (3) Criteria for what would constitute a failure to comply with a distribution system maintenance plan.
- (4) Criteria for identifying disruptions of the public water system.
- (5) Requirements for customer notification during times of increased risk of *Legionella* bacteria exposure, including a requirement to provide information about the risk of *Legionella* bacteria and measures consumers can take to reduce or eliminate exposure to *Legionella* bacteria.
- (6) Penalties for failure to maintain the minimum detectable disinfectant residual required under section 6703(a) (relating to duties of public water system), failure to comply with a certified distribution system maintenance plan, failure to comply with notification requirements or any other violations of this chapter.

In addition, the legislation mandates the following duties for public water systems:

***Minimum detectable disinfectant residual.*** --The owner or operator of a public water system which has more than 100 service connections and which is served fully or partially by surface water or groundwater under the influence of surface water, or any other public water system as determined by the department for the protection of public health, shall maintain:

- (1) For systems utilizing chlorine as a disinfectant, a minimum detectable disinfectant residual of at least **0.5 milligrams per liter of free chlorine** in all active parts of the public water system at all times.
- (2) For systems utilizing chloramine as a disinfectant, a minimum detectable disinfectant residual of at least **1.0 milligrams per liter of monochloramine** in all active parts of the public water system at all times.

***Best management practices.*** --The department (DEP) shall, within 12 months after the effective date of this subsection, develop and publish on its publicly accessible Internet website, best management practices for public water systems to discourage the growth and potential distribution of pathogens such as *Legionella* bacteria. The best management practices shall include information regarding:

- (1) Identification of areas of aging infrastructure, dead ends or components prone to biofilm accumulation.
- (2) Types of disruptions in the water distribution system.
- (3) Flushing details and schedules.

- (4) Disinfectant residual maintenance.
- (5) Storage tank maintenance.
- (6) Identification of areas of low water use, stagnation or low pressure.
- (7) Monitoring and testing.
- (8) Water age management.
- (9) Use of nitrification action plans for chloraminated systems.
- (10) Other measures the department deems necessary for the optimization of water systems.

***Distribution system maintenance plan.***--No later than six months after the adoption and promulgation of rules and regulations by the department (DEP), each public water system **shall** develop and implement a distribution system maintenance plan to comply with the provisions of this chapter in accordance with the best management practices developed and any applicable rules and regulations adopted and promulgated by the department. The public water system **shall** annually submit to the department a statement certifying that the public water system has developed and implemented a distribution system maintenance plan under this subsection.

Moreover, the owner or operator of a public water system that is subject to these new duties **shall** provide a record of a disruption of the public water system to the department via document upload or form submission to a data management system established by the department within 72 hours of the occurrence of the disruption of the public water system.

### **Failings of House Bill 2085**

The following summarizes the practical, public health, and scientific failings of House Bill 2085. We believe attempts at passing legislation addressing *Legionella*, if not through one committee, then through another, are not based on actionable public health protection nor on sound science.

First and foremost, the U.S. Centers for Disease Control and Prevention (CDC), U.S. Environmental Protection Agency (EPA) and drinking water experts agree that *Legionella pneumophila* (*L. p.*) is the cause of almost all Legionnaires' disease cases associated with a building water system and, therefore, should be the focus of public health action. In addition, there is a practical test method for *L. p.* in water but not for *Legionella* bacteria in general. To state that all *Legionella* bacteria, of which there are more than 40 species, would trigger regulatory action is wasteful of resources, undue for public health response, and would create much confusion. Along the same lines, the bill refers to "pathogens" in addition to *Legionella* bacteria. This would be akin to regulating "contaminants" in drinking water rather than identifying specific chemicals which is what the regulations are required to do.

**Second, *Legionella* is a premise plumbing issue and as such, building owners should address mitigation and control strategies within their buildings, including situations where a campus consists of multiple buildings. Public water systems have no regulatory authority to control the cold and hot water systems, and cooling towers, located within buildings.**

Moreover, **public water systems do not have authority to control or responsibility for water quality beyond the point of connection to the customer's service line, including large facilities and buildings.** Public health protection, to be effective in control of Legionnaires' disease, should focus on where exposure occurs and where *L. p.* amplifies to a public health risk.

Third, the **current minimum chlorine residual required in public water distribution systems is 0.2 mg/L** (free or total residual). This disinfection residual regulation was established in the revised Disinfection Requirements Rule (DRR) published in the *Pennsylvania Bulletin* on April 28, 2018<sup>i</sup> (most recent revisions to 25 PA Code, Chap. 109) following an extensive 2-year regulatory development process that included input from scientific and engineering experts, research by the DEP regarding chlorine residual policies in other states, as well as significant input from all sectors of the public water supply industry regarding consumer and regulatory compliance impacts anticipated with elevated chlorine residual requirements in the distribution systems. In addition, recent research using about 50 water systems from throughout the US has shown that increasing the minimum residual requirement would not result in a reduction in the occurrence of *L. p.* Science does not support this change. The EPA has been evaluating a change in the Safe Drinking Water Act to address a minimum residual. **Any such change should be made first by the EPA, using their broader base of science and expertise.**

In addition, **public health data and science do not support creating a much higher minimum residual for chloramine than for free chlorine.** In fact, just the opposite. Much data exists to show that systems carrying a chloramine residual have a much lower occurrence of *L. p.* in building water systems than those carrying a free chlorine residual. Specifically, the requirement for different minimum residuals for free chlorine and monochloramine for Legionella control is not consistent with the findings of The Water Research Foundation's Project #5156,<sup>ii</sup> which found that a residual of 0.2 mg/L was equally protective for managing *L. pneumophila* in public drinking water systems. Also, a May/June 2019 AWWA Water Science article, "*Occurrence of Culturable Legionella pneumophila in Drinking Water Distribution Systems*,"<sup>iii</sup> reported that a free chlorine residual of 0.1 mg/L was effective for controlling high levels (>1 MPN/mL) of *L. pneumophila* in water systems. Additionally, abundant research reviewed in an April 2024 Microorganisms article, "*Opportunistic Pathogens in Drinking Water Distribution Systems—A Review*,"<sup>iv</sup> has shown that chloramines control Legionella in water systems much better than free chlorine, resulting in approximately a tenfold lower concentration of the bacteria and a tenfold reduction in risk." Therefore, advocates of the bill should provide their scientific and public health data behind their proposed changes.

**It is also important to understand that public water systems must balance the effects of raising the minimum chlorine residual in the distribution system with maintaining acceptable levels of disinfectant by-products (DBPs) within regulatory compliance.** DBPs are known carcinogenic compounds with Maximum Contaminant Levels (MCLs) mandated by the EPA and regulated by DEP. **The higher the chlorine residual applied to the public water distribution system, the higher the potential for the formation of DBPs.** Additionally, increased chlorine residuals in the public water supply distribution system may result in having consumers abandon tap water for much more expensive bottled water or vended water.

**Universally raising the chlorine residual in public water supply systems is not the appropriate means to address *Legionella* control in downstream buildings.** *Legionella* control within buildings should focus on the premise plumbing of these buildings. There exist many appropriate ways, and standards, for managing hot- and cold-water systems in buildings. **The WUC believes that there is a need for training building water system owners and operators.**

Fourth, there exists no science upon which to define a “disruption” in a distribution system that would increase the occurrence of *L. p.* to a level of public health risk. In fact, very little if any data exists that demonstrates that *L. p.* would grow to a level of public health risk in a well-regulated water system. Thus, there exists no demonstrated definition of “disruption” nor any demonstrated response and mitigation strategies for *L. p.* following a “disruption.” This requirement would either require the DEP to construct many unproven assumptions for implementing a regulatory requirement or delay enforcement for years until research could demonstrate a “disruption” and its corrective action. Pennsylvania’s Department of Health, Bureau of Epidemiology issued a report on October 16, 2024, entitled: “*Pennsylvania Legionellosis Report 2021-2023*,” which indicated that “the majority of people with legionellosis became sick during the summer and early fall months.”<sup>vi</sup> Therefore, **the WUC believes that this data shows disruption from winter water main breaks have the least impact on cases and thus proves that the whole disruption premise is a false assertion.**

Fifth, there is no need to saddle the DEP with requiring water systems to develop and certify annually a separate “distribution system maintenance plan” for *Legionella* bacteria. **DEP already inspects water systems every 3-5 years wherein, during the Sanitary Survey, they review distribution system operations and maintenance.** This is an existing requirement for which adequately funded primacy agencies use very effectively for *L. p.* control as well as for any contaminant of concern listed under the Safe Drinking Water Act. Multiple standards and operation manuals already exist, such as through the American Water Works Association, to help the DEP in conducting Sanitary Surveys. This requirement would create a wasteful and confusing redundancy.

## Conclusion

While the WUC supports efforts to improve the management of *Legionella* in building water systems through building water management programs and training developed using the ANSI/ASHRAE 188 Standard – *Legionellosis: Risk Management for Building Water Systems*,<sup>vi</sup> **we do not support the proposed changes as they relate to public water systems.** As explained above, sound science, public health data, existing regulations and industry standards, and water industry experts do not provide the supporting background needed to move this bill forward. We would be glad to provide additional supporting information as needed or to discuss more effective ways to better manage Legionnaires’ disease.

Therefore, we respectfully request your **opposition to House Bill 2085.**

Respectfully submitted,



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CC: House Consumer Protection, Technology and Utilities

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<sup>i</sup> Disinfection Requirements Rule, *Pennsylvania Bulletin*, 48 Pa.B. 2509, April 28, 2018

<https://www.pacodeandbulletin.gov/Display/pabull?file=/secure/pabulletin/data/vol48/48-17/667.html>

<sup>ii</sup> Project 5156, Occurrence of Legionella pneumophila In Drinking Water Distribution Systems, The Water Research Foundation (WRF), 09/03/2024

<https://www.waterrf.org/research/projects/occurrence-legionella-pneumophila-drinking-water-distribution-systems>

<sup>iii</sup> "Occurrence of culturable Legionella pneumophila in drinking water distribution systems," Mark W. LeChevallier, June 2, 2019

<https://awwa.onlinelibrary.wiley.com/doi/10.1002/aws2.1139>

<sup>iv</sup> "Opportunistic Pathogens in Drinking Water Distribution Systems—A Review," by Mark W. LeChevallier, Toby Prosser and Melita Stevens, September 12, 2025

<https://www.mdpi.com/2076-2607/12/5/916>

<sup>v</sup> "Pennsylvania Legionellosis Report 2021-2023," Executive Summary, page 4, Pennsylvania Department of Health, Bureau of Epidemiology

<https://www.pa.gov/content/dam/copapwp-pagov/en/health/documents/topics/documents/diseases-and-conditions/PA%20Legionellosis%202021-2023%20Report.pdf>

<sup>vi</sup> ANSI/ASHRAE 188 Standard – Legionellosis: Risk Management for Building Water Systems

<https://www.ashrae.org/technical-resources/bookstore/ansi-ashrae-standard-188-2018-legionellosis-risk-management-for-building-water-systems>