



October 4, 2017

Versar, Inc.
ATTN: Tracey Cowen
6850 Versar Center
Springfield, VA 22151

Re: Docket ID No. EPA-HQ-OW-2016-0439, *Request for Public Comments To Be Sent to Versar, Inc., on an Interim List of Perchlorate in Drinking Water Expert Peer Reviewers and Draft Peer Review Charge Questions.*

The Association of Metropolitan Agencies (AMWA) is an organization representing the largest publicly owned drinking water utilities in the United States. Any changes in the development of national primary drinking water regulations would significantly impact our members. EPA has published a request for comment on the expert peer reviewers and charge questions that will be used to review EPA's draft report: *Proposed Approaches to Inform the Derivation of a Maximum Contaminant Level Goal for Perchlorate in Drinking Water*. As you know, AMWA has been involved with the issue of perchlorate since EPA first began pursuing a regulatory determination.

While the charge questions provided by EPA are comprehensive and cover the majority of the possible concerns with the draft report, AMWA believes that these questions may be too broad and therefore not targeted enough to address specific concerns related to the appropriateness of the approach for which an MCLG will be developed. AMWA feels strongly that specific and pointed questions are needed in order to achieve the most useful responses from the peer review panel. After reviewing the draft report and the list of charge questions provided by EPA, AMWA has derived the following questions that we hope will help EPA to obtain the most helpful feedback from the panel.

1. The report lists numerous, possibly significant, uncertainties within the model, particularly with iodine levels, the lack of a standard FT4 test, and the limited amount of existing data for the focus life-stage of early pregnancy. How reliable and precise do you feel this new model is for predicting FT4 hormone levels at different perchlorate exposures?
2. In the draft report, iron deficiency is listed as another possible cause for hypothyroxinemia. How does this model, or the conclusions made from the model, account for other possible factors that may compound or overshadow the effects of perchlorate?

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Diane VanDe Hei

3. The Science Advisory Board defined hypothyroxinemia by a “variety of cutoffs...ranging from fT4 below the 10th or 5th percentiles to below the 2.5th percentile”. How much variation and/or uncertainty does a range this broad pose when using as a reference point for determining the impact of perchlorate on the shift of women becoming hypothyroxinemic?
4. Multiple neurodevelopment measurements were used with the model’s output. Are the statistical findings reliable since only one or two studies are used for each measurement? Should more studies be used to validate these findings before coming to a conclusion?

Thank you for consideration of our comments. If there are any questions, please contact Stephanie Hayes Schlea, AMWA’s Regulatory Affairs Manager at 202-331-2820.

Sincerely,



Diane VanDe Hei
Chief Executive Officer

Cc: Michael Shapiro, Acting Assistant Administrator of Office of Water and Eric Burneson,
Director of Standards & Risk Management Division