

**HB 722 SUPPORT TESTIMONY**  
**Labor and Employment - Occupational Safety and Health - Heat Stress Standards**

Dear Chair Davis, Vice Chair Dumais, and members of the Economic Matters Committee;

I am an occupational medicine physician practicing in the state of Maryland. I am here today to support HB 722, which requires Maryland OSHA to develop a standard for heat stress. Federal OSHA does not have such a standard, leaving it to states like ours to take this necessary step.

Excessive heat can cause heat stroke and even death if not treated properly. It also exacerbates existing health problems like asthma, kidney failure, and heart disease. Workers in agriculture and construction are at the highest risk, but the problem affects all workers exposed to heat, including indoor workers without climate-controlled environments. Workers at risk include construction workers, landscapers, airline ground service workers, laundry workers, some manufacturing workers and many more.

The National Weather Service recommends issuing a heat advisory when the heat index reaches 100°F. At these heat index levels, people—particularly vulnerable groups, such as children and elderly adults—are susceptible to heat-related illness and death. Outdoor workers are susceptible to the same effects with a heat index around 90°F.

The risk of these illnesses is expected to increase as the severity and frequency of extreme heat increases sharply in coming years. The State of Maryland currently typically records 30 days with a heat index of 90 degrees Fahrenheit (90°F)<sup>i</sup> or more every year. The Union of Concerned Scientists developed a report for each of Maryland's congressional districts and estimated 78-80 days with a heat index over 90°F by mid-century across most of the state.

The American College of Occupational and Environmental Medicine, our national organization of occupational medicine physicians, supports legislation to address this impending crisis, as do many other national organizations. In a letter of support for national legislation the coalition pointed out that:

*"The National Institute for Occupational Safety and Health (NIOSH) issued criteria for a heat standard in 1972, updating it in 1986 and 2016. In 2019 more than 130 organizations and former OSHA administrators petitioned OSHA for a heat stress standard that builds upon the NIOSH criteria. California, Washington, Minnesota and the U.S. military have issued heat protections. Absent a federal standard, OSHA currently polices heat-related injuries and deaths only by enforcing its "catch all" general duty clause that requires employers to provide safe workplaces. Enforcement is scarce and, by definition, reactive rather than preventive. Notably, from 2013 through 2017,*

*California used its heat standard to conduct 50 times more inspections resulting in a heat-related violation than OSHA did nationwide under the general duty clause.*

*Protecting workers from heat also has economic benefits. In high heat, people work less effectively due to “diminished ability for physical exertion and for completing mental tasks,” which reduces productivity, increases the risk of accidents, and drives up medical expenses. The costs of lower labor productivity under rising temperatures is estimated to reach up to \$160 billion in lost wages per year in the U.S. by 2090 according to the 2018 National Climate Assessment. These impacts can be mitigated by heat protections. For instance, in 2011 a central Texas municipality implemented a heat illness prevention program for outdoor municipal workers that not only resulted in a significant decrease in heat-related illnesses, but a decrease in worker’s compensation costs by 50% per heat-related illness.*

Occupational medicine physicians focus on treatment and prevention of injury and illness from conditions of work. Preventing illness and death from heat stress is straightforward, and your bill provides an excellent framework in which Maryland OSHA should proceed.

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