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**SB 0264**

February 10, 2026

**TO:** Members of the Education, Energy and Environment Committee  
**FROM:** Nina Themelis, Director, Mayor's Office of Government Relations  
**RE:** **SB0264 - Drinking Water - Regulation - Control and Prevention of Waterborne-Disease**

**POSITION: LETTER OF INFORMATION**

Chair Feldman, Vice Chair Kagan, and Members of the Committee, please be advised that the Baltimore City Administration (BCA) has **concerns with** Senate Bill 264.

Senate Bill 264 (SB0264) establishes minimum detectable disinfectant residual level requirements, disinfectant residual testing requirements, and related requirements for the control of Legionella bacteria and other pathogens in the public water supply. The bill also requires suppliers of water to provide certain notices and records regarding disruptions in the water distribution system and establishes requirements for the investigation of reported cases of Legionnaires' disease.

As written, SB264 would mandate higher chlorine levels and additional reporting, despite existing daily system-wide sampling requirements. Raising chlorine levels will likely increase the possibility of harmful disinfection byproduct levels, creating new water quality issues. It would also require costly upgrades, such as new treatment processes, water main rehabilitation, and/or chlorine booster stations throughout the distribution system. Low or zero chlorine is not the sole cause of Legionnaires' disease, which occurs in warm or stagnant water within buildings such as hospitals and schools—conditions outside the public water distribution system. Additionally, the notification and third-party requirements are overly burdensome, unrealistic, and would require dedicated outreach staff, further increasing system administration costs.

The BCA has significant concerns with SB264 as this legislation represents a major expansion of regulatory responsibility, public notification duties, and enforcement exposure for water utilities by establishing rigid state-wide operational standards, treating routine system work as reportable health-risk events, and shifting risk, cost, and public perception burdens onto utilities without dedicated funding or operational flexibility. Given the absence of reported outbreaks in Baltimore City, we believe this legislation is unnecessary at this time.

For these reasons, the Baltimore City Administration respectfully requests **consideration of the above information** on SB264.