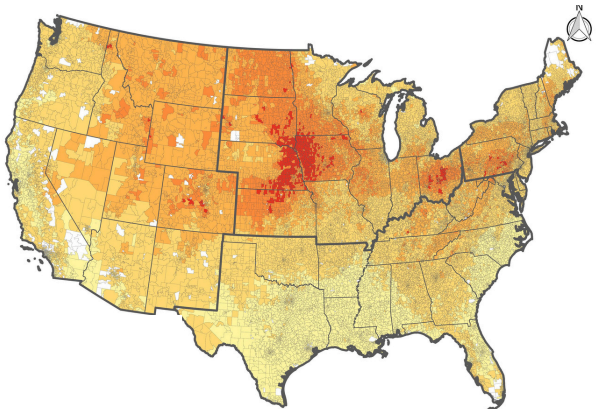
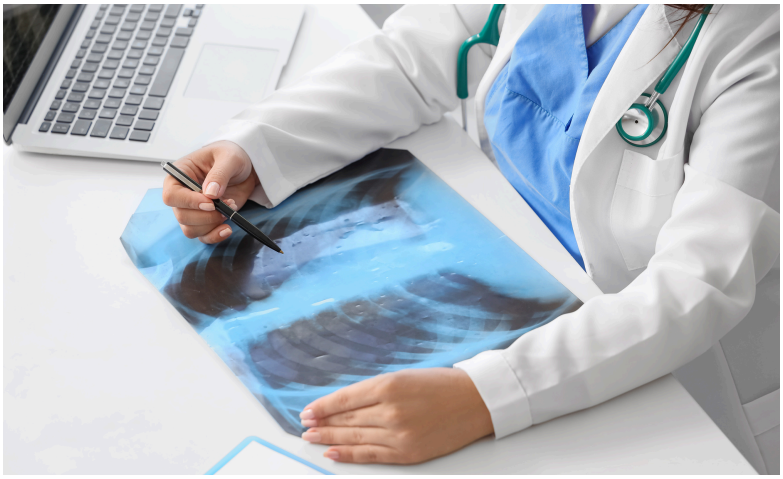
REDUCE IOWANS' EXPOSURE TO RADON

a leading cause of cancer in Iowa's environment.



Density distribution of radon measurements by radon zone and the contribution of each zone (defined by average radon predictions) to the population exposed to radon levels above the EPA action level

RADON EXPOSURE KILLS AN ESTIMATED 400 IOWANS EVERY YEAR. IT IS THE SECOND-LEADING CAUSE OF LUNG CANCER BEHIND SMOKING IN IOWA, AND THE LEADING CAUSE AMONG PEOPLE WHO HAVE NEVER SMOKED. IOWA HAS THE HIGHEST AVERAGE RADON CONCENTRATIONS IN THE UNITED STATES WITH 70% OF HOMES HAVING CONCENTRATIONS ABOVE THE EPA'S RECOMMENDED ACTION LEVEL OF 4 PCI/L.



THE PROBLEM

Radon was declared a carcinogen in 1988 by the U.S. Environmental Protection Agency. Most radon mitigation efforts in the U.S., including in Iowa, are centered around the EPA action level of 4 pCi/L, but most radon-induced lung cancers occur below the EPA's action level. There is no safe level of radon exposure, and even the EPA's action level is the equivalent of receiving 200 chest X-rays per year.

WHAT YOU NEED TO KNOW

1. Radon is a colorless, tasteless, and odorless gas that originates from the decay of uranium content in rocks. Radon enters buildings through openings in foundations or walls. High levels of indoor radon concentrations are inhaled by Iowa families and can cause severe health complications, such as lung cancer.

2. At 4 pCi/L, the EPA's action level for radon, the lifetime risk of radon-induced lung cancer death for people who have never smoked is 7 per 1,000 people, compared with 62 per 1,000 people who have ever smoked. As radon levels increase to 10 pCi/L, these risks grow considerably to 18 per 1,000 people for those who have never smoked and 150 per 1000 people for people who have ever smoked.

3. Every additional 2.7 pCi/L of radon exposure raises the risk of developing lung cancer by an additional 10%. An Iowa-based study found that 15 years of exposure to radon levels at 4 pCi/L was associated with a 24% to 83% increase in the odds of developing lung cancer.

Iowa's lung cancer rate of 60.8 per 100,000 people is significantly higher than the national rate of 53.1 per 100,000. Iowa ranks last among all states in reducing lung cancer mortality.

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POLICY SOLUTIONS FOR RADON MITIGATION

State-level policy is essential to reducing Iowans' radon risk by ensuring that education, testing, and mitigation are accessible, consistent, and prioritized across the state. By setting clear standards and expanding resources for these three pillars of prevention, Iowa can better protect residents from one of the most significant — and preventable — environmental health threats in their homes.

MITIGATION

Establish a county opt-in program for radon-resistant new construction (RRNC)
Establish a voluntary standard for radon-resistant new construction which would allow counties to opt-in with a vote from the county board of supervisors.

Explore property-assessed radon mitigation financing
Established a fund for counties that opt in to the RRNC program to receive a yearly or one-time allotment to help residents cover the cost of mitigation systems.

Establish a refundable tax credit up to $1,500 for radon mitigation systems with a public direct pay option

Establish a point-of-sale rebate for radon mitigation systems at the retail level

TESTING

Increase access to free and low-cost radon testing
Build on the success of the Private Well Grants Program by offering a similar program for radon testing. The state has a successful model and infrastructure that could reach many Iowans while keeping administrative costs low.

Increase annual testing allocation to $120,000 to accommodate demand
To facilitate the availability of free testing at the demand seen in 2025 (about 675 tests/month), the state should allocate at least $120,000 annually to cover the full cost of 8,100 tests.

EDUCATION

Increase smoker-oriented interventions
For the state to increase the efficacy of any radon mitigation efforts, messaging should be directly focused on smokers. Instruct the Iowa Department of Health and Human Services and local public health agencies to create tailored radon-informed messages about the outsized risk for smokers and deploy them in places that smokers frequent; some of these locations could include tobacco retailers, liquor stores, and casino smoking sections. The state could also require these resources to be clearly displayed in these places as a condition for receiving a retail tobacco permit from the Iowa Department of Revenue.

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