

American Lung Association • Allergy & Asthma Network
Alliance of Nurses for Healthy Environments
American Public Health Association • Asthma and Allergy Foundation of America
Children's Environmental Health Network • Healthcare Without Harm
National Environmental Health Association • Trust for America's Health

August 10, 2016

The Honorable Gina McCarthy
Administrator, U.S. Environmental Protection Agency
1200 Pennsylvania Ave, N.W.
Washington, DC 20460

RE: Comments on EPA Docket ID No. EPA-HQ-OAR-2015-0531--Proposed revisions to the Regional Haze Rule

Dear Administrator McCarthy:

We public health and medical groups urge the U.S. Environmental Protection Agency to strengthen the Regional Haze Rule. While the Regional Haze Rule formally addresses visibility, a stronger Rule will provide benefits that extend far beyond improving the views in our National Parks: most importantly, it will better protect human health by reducing harmful pollution in the air Americans breathe.

Reducing emissions that cause haze protects human health

The types of air pollution that contribute to haze in our national parks and wilderness areas include pollutants that our organizations have long advocated to reduce. The visible haze primarily consists of particulate matter, one of the most widespread and dangerous air pollutants to human health. Particulate matter causes premature death, as EPA's own review has confirmed.¹ The International Agency for Research on Cancer, part of the World Health Organization, has found that particulate matter causes lung cancer.² Breathing these particles also causes asthma attacks, decreases lung function, and worsens respiratory problems. Particulate matter also causes cardiovascular problems, including heart attacks. EPA also concluded that research shows particulate matter may cause harm to reproductive and developmental systems and to the central nervous system³

The emissions that create these particles include sulfur dioxide, oxides of nitrogen, and, to a lesser degree, volatile organic compounds and ammonia.⁴ These pollutants directly harm human health by worsening asthma and are linked to many other health effects, including premature death and cancer. Sulfur dioxide causes difficulty breathing and asthma attacks.⁵ Nitrogen oxides cause asthma attacks and other respiratory harm, and have been linked to other threats to health, including lung cancer, cardiovascular harm and low birth weight in newborns, as well as premature death.⁶

In addition, nitrogen oxides are a recognized precursor to the formation of ground-level ozone, which also worsens asthma and shortens lives.⁷ National Parks, including the magnificent Yosemite in California and the Great Smoky Mountains in North Carolina and Tennessee,

experience far too many days with ozone at levels that threaten the health of visitors and the ecosystem.

Millions of Americans are especially vulnerable to these pollutants. Children and the elderly face increased risk, as do people with heart and lung disease and diabetes. People living in low-income communities also face disproportionate risk.⁸

EPA's own estimates in 2005 predicted that the Regional Haze Rule would prevent 1,600 premature deaths and 170,000 lost work days among adults, and would prevent 31,000 asthma attacks and 13,000 ER visits among children in 2015. EPA acknowledged that this prediction did not include benefits from the reduced ozone, which would have increased the total in each category.⁹ Although this current proposal does not include an updated estimate, the total numbers of these avoided harms to people's lives and health would be expected to increase as emissions are further reduced.

The Proposal strengthens some protections, but should be stronger

We applaud the measures in this proposed update that would strengthen the Regional Haze Rule. In particular, we are pleased that the proposed rule clarifies that all states are responsible for making emissions reductions, not just states with Class 1 air sheds. It is crucial that all states address sources of pollution that are affecting national parks and wilderness areas.

We support requiring more robust justifications from states if they argue certain reductions or controls aren't reasonable. We also support the clarification that states that are not on track to meet their goals must do everything possible to meet them.

However, we are concerned that the proposed update could result in delays in emission reductions. The proposed rule gives states an additional three years to submit State Implementation Plans, moving the deadline from 2018 to 2021. While the proposal does not extend the end of the next planning period, extending the SIP deadline could result in additional delays in implementing needed measures.

Another opportunity for delay is the extension from 3 years to 9.5 years for states to produce pollution control plans in response to a finding of Reasonably Attributable Visibility Impairment, showing that a single source is responsible for air quality issues in a park. This could result in polluting sources delaying reducing their emissions for nearly a decade. We urge EPA to keep the existing response time requirement of three years.

EPA attempts to make clear that the visibility and air quality must continue to improve through reasonable progress goals and long-term strategy development. However, several changes weaken that requirement, including maintaining 2000-2004 as a baseline for comparisons. Those years were the most polluted period in this century. Lower haze levels now stem from steps put in place since then to reduce emissions from some of the higher emitting sources. While this proposal intends to clarify this requirement, EPA has the opportunity to update this to offer the current or a more recent period as a baseline for measurement.

We are also concerned that the proposal weakens reporting requirements for states. Under the current rule, states must submit comprehensive plans every 10 years and SIP revisions, or “progress reports,” at each five-year midpoint. The proposed rule weakens the requirements for these progress reports. The public would no longer have the opportunity to be informed and to comment, and EPA would no longer have to approve of the plan, because the formal SIP revision process would no longer be required.

We urge EPA to reconsider these reporting requirements to ensure that progress can be appropriately tracked and enforced.

EPA can improve visibility and health

Overall, this proposed update contains important strengthening provisions for the Regional Haze Rule. We encourage EPA to strengthen the final rule further by reducing the possibility of delay and maintaining the existing requirements for state progress reports.

Sincerely,

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¹ U.S. Environmental Protection Agency. Integrated Science Assessment for Particulate Matter (Final Report). U.S. Environmental Protection Agency, Washington, DC, EPA/600/R-08/139F, 2009. Available at <http://cfpub.epa.gov/ncea/cfm/recordisplay.cfm?deid=216546>.

² Hamra GB, Guha N, Cohen A, Laden F, Raaschou-Nielsen O, Samet JM, Vineis P, Forastiere F, Saldiva P, Yorifuji T, and Loomis D. Outdoor Particulate Matter Exposure and Lung Cancer: A Systematic Review and Meta-Analysis. *Environ Health Perspect.* 2014; 122: 906-911.

³ U.S. EPA, 2009.

⁴ U.S. EPA, 2009. 81 Federal Register 26946 (May 4, 2016).

⁵ U.S. EPA. 2008 Final Report: Integrated Science Assessment (ISA) for Sulfur Oxides – Health Criteria. U.S. Environmental Protection Agency, Washington, DC, EPA/600/R-08/047F, 2008.

⁶ U.S. EPA. Integrated Science Assessment for Oxides of Nitrogen – Health Criteria (2016 Final Report). U.S. Environmental Protection Agency, Washington, DC, EPA/600/R-15/068, 2016.

⁷ U.S. EPA. 2013 Final Report: Integrated Science Assessment of Ozone and Related Photochemical Oxidants. U.S. Environmental Protection Agency, Washington, DC, EPA/600/R-10/076F, 2013.

⁸ U.S. EPA, 2009.

⁹ 70 Federal Register 3914-7 (July 6, 2005).