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David A. Bloom  
Acting Chief Financial Officer, Office of the Chief Financial Officer  
U. S. Environmental Protection Agency

Submitted via Regulations.gov

RE: Comments submitted on the *Draft FY 2018-2022 EPA Strategic Plan*, Docket  
ID: EPA-HQ-OA-2017-0533-0001

Dear Mr. Bloom:

On behalf of the American Lung Association, thank you for the opportunity to provide comments on the *Draft FY 2018-2022 EPA Strategic Plan*. It is vitally important for the strategic plan to provide the direction that the U.S. Environmental Protection Agency needs to have to accomplish its mission of truly protecting human health and the environment. Discussed below are some of the key concerns that emerged from the perspective of protecting human health from the dangers of air pollution and climate change. The American Lung Association calls on the Administrator to revise this plan to reflect the Agency's responsibility to provide these essential protections.

#### **Draft Plan eliminates any discussion of Climate Change**

"Climate change poses risks to human health, the environment, cultural resources, the economy and quality of life." That quote was the first sentence of the previous EPA Strategic Plan, covering 2014 to 2018. That plan recognized the multiple, interwoven threats that climate change poses to Americans' individual and public health. From increased heat, extreme weather events, wildfires to increased risk of air pollution, the U.S. has experienced multiple examples of the threats just in the last few months from climate change. EPA's decision to eliminate ways to address climate change from this plan completely ignores not only the legal responsibility that EPA has under the Clean Air Act to protect Americans from recognized air pollution threats, including carbon pollution and other greenhouse gases that endanger human health and welfare. There is clear and mounting evidence of climate change's widespread impact on human health and the environment that will also negatively affect every other target in EPA's plan.

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By ignoring this issue, EPA adds to the challenges EPA and every state and tribe will have to reach the goals EPA sets forth. Communities in nonattainment of the national ambient air quality standards (NAAQS) for ozone, for example, will have a significantly harder time to meet that standard with increased temperatures, as that heat increases the risk of ozone forming and requires greater reduction in precursor emissions. States and tribes need EPA to provide action and support to meet the challenges ahead, not to ignore and deny any major and fundamental threats to human health. EPA's strategic plan must recognize the threats posed by greenhouse gases and take steps to aggressively reduce them in accordance with its statutory authority under the Clean Air Act.

### **Draft plan ignores, revises and omits essential targets in the core mission of air quality**

EPA's discussion of *Objective 1.1 – Improve Air Quality* irresponsibly narrows the work and ignores significant elements of the responsibility EPA holds to protect human health.

To begin, EPA targeted goal in this Objective is to “reduce the number of nonattainment areas” under the National Ambient Air Quality Standards (NAAQS) program for the criteria pollutants, including ozone. The goal should be revised to “increase the number of areas that achieve healthful air quality and meet the NAAQS.”

Unfortunately, EPA's failure to comply with the Clean Air Act has prevented states and tribes from effectively pursuing that work to clean up the air to protect the health of their residents and meet the NAAQS. Specifically, EPA has failed to meet the October 1 deadline to designate the nonattainment areas under the 2015 ozone NAAQS despite having known and prepared for this deadline requirement for two years. No word has come from EPA giving any estimate of the expected announcement. This silence follows the disturbing announcement by Administrator Pruitt that the EPA had intended to delay this decision by one year, a decision that he later, after legal challenges, including from the Lung Association, announced that he had reversed.

EPA's work on reducing emissions from stationary sources, including coal-fired power plants, is essential. We agree that operating “effective nationwide and multi-state programs,” is an indispensable responsibility of the EPA, including the cross-state air pollution rule which is explicitly mentioned. The actions of the Agency to repeal the Clean Power Plan raises significant concerns that EPA is ignoring one of the most significant pollutants from stationary sources. Furthermore, in other documents, EPA has proposed to discount and dismiss the direct benefits to human health from reducing emissions from power plants under the Clean Power Plan, which would likely result in less incentive to clean up pollution from stationary sources. We urge EPA's analysis to fully account for all the health benefits associated with reducing pollution from stationary sources.

EPA recognizes the Agency's responsibility in reducing emissions from mobile sources, including on road and nonroad sources and their fuels. Recent actions from EPA call into question whether the EPA is over-emphasizing “certainty” for industry over its mission or to protect public health; in particular, EPA's efforts to revoke the existing requirements and create a loophole for freight trucks powered by an old

engine, known as “glider trucks,” that would allow them to emit 20 to 40 times more emissions than new trucks meeting the current standards. This loophole will clearly benefit industry, but will result in more air pollution and lead to as many as 1,600 early deaths from just one year of this loophole. This is completely inconsistent with EPA’s core mission.

The Agency commits to increased focus on air quality monitoring. The nation’s air quality monitoring infrastructure is critically important for protecting public health from dangerous air pollution. The U.S. has a long-standing need for more certified monitors and modeling to improve reliable information and help expand protections for millions of Americans. And as other sources of air quality data emerge, including satellites or localized air quality sensors, we urge caution incorporating these types of data sources into the decision-making process until their consistency, reliability, and appropriate uses can be fully accessed.

Missing entirely from Objective 1.1 is any discussion of indoor air pollution. People spend most of their time indoors and EPA has historically committed to assisting the public, other federal agencies, business and non-governmental partners, the states and tribes to better protect health in those environments. EPA has long provided key leadership in helping to educate the public and to assist in implementing strategic policies to reduce indoor air pollution, including improving indoor air quality in schools and reducing exposure to radon in homes and other indoor locations, the second leading cause of lung cancer. EPA should recognize indoor air as a priority area for the next four years.

Missing also from Objective 1.1 is any acknowledgement that many communities remain disproportionately burdened by air pollution. EPA has seen the abundant evidence that communities of color, low-income communities and frontline communities remain at higher risk: they continue to suffer greater exposure to harmful air pollutants; they are more likely to have diseases or other conditions that increase their risk of harm from these pollutants; and they have fewer resources to take action to protect their families. EPA needs to recognize and integrate protecting these communities into the strategic priorities in the plan.

#### **EPA’s commitment to increase transparency lacks credibility in light of recent actions**

The plan’s *Objective 2.2—Increase Transparency and Public Participation* also diverges from EPA’s recent actions. The American Lung Association values an increased commitment to transparency and willingness to engage more with the public as outlined in the strategic plan. Unfortunately, EPA’s recent decisions to eliminate or alter important scientific information from the website, limit EPA staff from presenting at a conference and restricting independent scientists from participating in EPA’s scientific advisory boards, while increasing the role of representatives from the regulated industry, suggest that much more work must be done to demonstrate a commitment to transparency. EPA cannot credibly promise one thing and take the opposite action.

**EPA should improve enforcement of the law, as Congress intended—starting with its own actions**

The Lung Association has long had a commitment to defending the Clean Air Act, one of the nation's most protective public health laws. Congress provided a strong toolbox in that law to enable EPA, the states and the tribes to work together to protect public health from the ravages of air pollution which were all too visible to the nation in 1970. EPA has had, over the years, a mixed response to meeting the requirements of the law. That ebb and flow of enforcement has appeared under Administrations from both parties. Actions such as the 2015 determination that Volkswagen had cheated show that the EPA staff had worked hard to uncover difficult-to-find and egregious violations of the law.

However, as cited in examples in this letter, the EPA has shown a reluctance to comply with the law itself. The failure to meet the mandatory two-year requirement for designations under the ozone NAAQS is probably the most clear-cut violation. EPA's pledge to enforce the law against those who do not comply with the law must include a commitment from the Agency itself to do just that.

**The plan focuses on the wrong community for protection**

Repeatedly in this plan, EPA lists "the regulated community" first in its list of priorities. Two examples are these sentences in the opening discussion of the *Goal 3: Rule of Law and Process*:

"Compliance with the law is not just about enforcement—it is about ensuring consistency and certainty *for the regulated community* so it has a complete understanding of the impact of proposed actions on human health, the environment, and the economy, and a clear path and timeline to achieve that compliance." (Italics added)

"One of EPA's highest priorities must be to create consistency and certainty *for the regulated community*." (Italics added)

In the work EPA is required to do under the Clean Air Act, the key priority and clear mandate is protecting public health. Millions of Americans face severe, life-altering threats from the air they breathe: risks of premature death; asthma attacks, heart attacks and other respiratory and cardiovascular harm; increased risk of lung cancer; increased risk of hospital admissions, and missed work and school. These Americans include newborns, children and teenagers; older adults; people with lung diseases, cardiovascular diseases and diabetes; people with low incomes and communities of color. They deserve to be the priority groups in EPA's strategic plan.

**EPA's commitment to prioritize robust science does not reflect its actions to remove and discount the scientists.**

In Objective 3.3, EPA pledges to "refocus the EPA's robust research and scientific analysis to inform policy making." We are very concerned that EPA's recent actions do not reflect this pledge.

Strong science is the core of the work that EPA does. Recognized in the Clean Air Act and other laws, current, well-reviewed and assessed science forms the basis for such key protections as the NAAQS.



EPA rightly engages its scientific advisory boards, including the Clean Air Scientific Advisory Committee, to provide essential insight, assessment and review of the research that assesses the impact on public health and the strategies and the effectiveness to provide those protections.

Unfortunately, despite the recognition of the importance of this work, the language in the objective “refocus” implies that the previous commitment to independent science was somehow flawed. The scientific advisory boards have historically followed the goal of providing independent scientific advice to the Administrator to inform policymaking. However, the recent actions of EPA appear to confirm concern of many in the medical and public health community that “refocus” instead really means to restrict the participation of independent scientists and instead increase the role of representatives from the regulated community.

We are very alarmed at the haste with which the agency has moved to restructure scientific boards in this way, delaying and disabling the crucial role that independent scientists play in EPA policymaking. For example, EPA’s recent decision to dismiss 12 members of the 18 members of the Board of Scientific Counselors—a board specifically cited in the plan—raises concerns for future of this Board and others like it. Fundamentally, such a massive loss of experienced members slows down the actions they must take as the time to invite and appoint new people as well as have new appointees get up to speed on the questions they must answer. We remain concerned, too, that efforts to stuff these boards with representatives of “the regulated community” will tilt the decisions that these boards make for years to come toward less protection for the public.

**EPA must protect public health and the environment.**

In conclusion, the Lung Association finds many crucial threats to the nation’s health that EPA should be planning to address are missing from this plan, especially climate change. We urge EPA to commit to working on those issues in the next four years. However, of greater concern is the growing evidence that EPA’s recent actions do not follow the commitments in this plan. The American Lung Association urges EPA to reconsider its actions in light of its proposed commitments to these strategies.

Sincerely,



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