

**American Academy of Pediatrics • American Lung Association  
American Public Health Association • American Thoracic Society  
Alliance of Nurses for Healthy Environments  
Allergy & Asthma Network • Asthma and Allergy Foundation of America  
Center for Climate Change and Health • Public Health Institute  
Children’s Environmental Health Network • Physicians for Social Responsibility  
Healthcare Without Harm • March of Dimes • Trust for America’s Health  
National Association of County and City Health Officials**

February 13, 2017

Catherine McCabe  
Acting Administrator  
U.S. Environmental Protection Agency  
1200 Pennsylvania Avenue, NW  
Washington, DC 20004

Submitted via: <http://www.regulations.gov>

RE: Implementation for the 2015 National Ambient Air Quality Standards for Ozone: Nonattainment Area Classification and State Implementation Plan Requirements. Docket ID No. EPA-HQ-OAR-2016-0202

Dear Acting Administrator McCabe:

The undersigned medical, nursing and public health organizations appreciate the opportunity to submit comments on the U.S. Environmental Protection Agency’s proposed regulations for implementing the 2015 National Ambient Air Quality Standards for Ozone.

[Implementing the Clean Air Act requirements is essential to protecting public health](#)

The Clean Air Act establishes the primary National Ambient Air Quality Standard (NAAQS) to protect public health from the nation’s most widespread air pollutants, including ozone. In the review that led to the adoption of the 2015 ozone standard, growing research added substantial weight to the evidence showing the extensive impact of ozone. Research not only confirmed the previous conclusions about ozone’s impact on human health, but added to and clarified the impact on multiple physiologic systems, including respiratory and cardiovascular. Examination of long-term exposure identified outcomes beyond the traditional concerns to include the central nervous system and reproductive and developmental effects. The abundant evidence of effects associated with breathing ozone for longer periods adds to the urgency to ensure the strongest approach to achieve the standard now in place to reduce those exposures.

The Clean Air Act directed EPA and the states to protect Americans who live where the air is unhealthy by implementing comprehensive efforts to meet the standards. Millions of Americans face higher risk of health harms. Children, people with asthma and other lung diseases, seniors, outdoor workers and people who have low socioeconomic status have long been shown to be vulnerable to ozone. Newer evidence shows some otherwise healthy adults are especially sensitive to ozone exposure because of limitations in some nutrients and certain genetic variants. In addition to these groups, the EPA’s documented evidence that suggests increased risk to fetal development and to cardiovascular harm

(EPA, Integrated Science Assessment, 2013). Putting the 2015 ozone standard in place provides essential protection to these sensitive groups.

The nation needs strong, effective EPA rules to ensure that children, seniors and other at risk groups actually receive these protections as the Clean Air Act requires. These rules must comply with the Clean Air Act's clear requirements for how areas clean up the emissions that foul the air they breathe. These rules must be effective: they must have no escape hatches that allow areas to evade or circumvent their responsibility to truly clean up the air as expeditiously as practicable.

#### [The 2008 Standard should not be revoked](#)

Our organizations support retaining the 2008 ozone NAAQS while implementing the 2015 standard. Maintaining the 2008 standard will help drive timely progress toward healthy air, as the Congress intended. The planning and actions taken to reduce emissions to meet the 2008 ozone standard will help the areas in nonattainment for the 2015 standard to meet both standards on time.

EPA has itself argued the benefits of keeping the 2008 standard in place. Just last August, EPA explained that revoking a prior standard "could delay attainment for that NAAQS and slow progress on attaining [the new NAAQS] because such areas would not be subject of all of the planning requirements in the [Clean Air Act] after the date of the revocation." (81 FR 58146).

EPA undermines progress toward clean air by revoking the 2008 standard. Cleanup actions that would have advanced healthier air would be delayed with the 2008 standard no longer in place. For example, Houston is in nonattainment under the 2008 standard and could fail to meet that standard by its deadline in 2018. If that happens, under the law, Houston would normally "bump-up" to requirements for stronger controls. However, if the 2008 standard is revoked and the ozone problems continue in Houston, then the city would face no "bump-up" requirement to require stricter controls than are currently required until 2024, given the currently likely schedule for the 2015 standard.

If EPA decides to revoke the 2008 standard, EPA should ensure that the anti-backsliding provisions include not only the same provisions as in the implementation rule for the 2008 ozone standard, but retain the bump-up, attainment deadlines, and maintenance plan requirements as required under the Clean Air Act. Without such provisions some areas that were in nonattainment under the 2008 standard will risk the health protections under the law.

#### [Protecting public health does not include emissions averaging](#)

Cleaning up ozone pollution requires limiting the emission of ozone precursors—volatile organic compounds and nitrogen oxides. The Clean Air Act unambiguously requires the installation of reasonably available control technology (RACT) on all existing major stationary sources of such pollution located in nonattainment areas. RACT comprises the least challenging controls under the Clean Air Act: those that are reasonably available. The Act clearly requires that these controls be placed on each of the major sources to reduce emissions that form ozone. However, EPA's proposal to allow averaging of these would limit or avoid necessary reductions.

#### [Multi Pollutant planning provides a good framework, but must be enforceable](#)

Our organizations have supported the approach to reducing emissions from multiple air pollutants from the increased use of energy efficiency and renewable energy strategies, for example, as developed for the Clean Power Plan. Improved energy efficiency reduces amount of energy needed, while expanded

renewable energy provides much cleaner sources of power. Thoughtful land use planning and increased mass transit and other transportation options remain positive approaches but with much longer-term results. Our organizations hope that these measures continue to grow. However, for them to be effective components of these implementation plans, they must be enforceable.

#### Thanks to national measures in place, many areas will meet the 2015 standard

Based on the scientific and medical evidence, many of our organizations strongly supported a more protective ozone standard than EPA adopted in 2015. However, the 2015 standard is a positive step toward improving public health. Importantly, EPA has adopted many measures that will enable large parts of the nation to meet the 2015 standard and better protect the health of the nation's citizens. Strong federal rules such the Tier 3 Vehicle and Fuel Standards, the Low Emission Vehicle program in place in California and twelve other states, and the Cross State Air Pollution Rule, will reduce vehicle emissions and ozone that blows across state lines, cleaning up large sources nationwide.

#### Protect our patients and our nation's health with strong implementation of the standard

Thanks to stronger standards, the nation has reduced the burden of ozone on the health of our patients and the public. As EPA estimated, meeting these standards will avoid up to 660 premature deaths and prevent 230,000 children's asthma attacks each year as of 2025, as well provide many other health benefits. Those benefits are underestimates, as they do not count the health improvements that will result in California once all of California meets the 2015 standard. Our organizations urge EPA to follow the Congressionally-established framework in the Clean Air Act to ensure that all areas of the United States meet and maintain the 2015 ozone standard as expeditiously as practicable.

Thank you for the opportunity to provide these comments.

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