December 29, 2016

Gina McCarthy, Administrator
U. S. Environmental Protection Agency


Dear Administrator McCarthy:

As representatives of the medical and public health community, our organizations write in strong support of your Proposed Determination on the Appropriateness of the Model Year 2022-2025 Light-Duty Vehicle Greenhouse Gas Emissions Standards Under the Midterm Evaluation. We concur with the Administrator’s conclusion that the model year 2022-2025 light-duty greenhouse gas standards remain appropriate under the Clean Air Act.

The impact of climate change on human health supports the strongest possible greenhouse gas standards to reduce the impacts of climate change. We believe that the record supports the proposed determination that the standards should not be less stringent. Indeed, as many of our organizations indicated in earlier comments, the evidence supported the U.S. Environmental Protection Agency strengthening the required reductions in GHG emissions going forward to adequately respond to the full nature of climate and air pollution health threats. The record indicates that vehicle technologies currently available would allow vehicles to meet and exceed the MY 2022-2025 GHG reduction standard.

The determination should be finalized as soon as possible to facilitate the implementation of the rules and ensure the climate and health benefits expected in the initial rulemaking are achieved. Furthermore, the U.S. EPA should work with the California EPA in support of more protective state and federal standards for model year 2026 and beyond to achieve even greater benefits.

Climate change poses grave threats to public health. To protect our communities and the public, the United States must significantly reduce greenhouse gases from all sources and continue to show international leadership to motivate action by other countries. The changing climate threatens the health of Americans alive now and in future generations. Growing evidence over the past few years has
demonstrated the multiple, profound risks that imperil the lives and health of millions. Consequently, the nation has a short window to act to reduce those threats.

Released earlier this year, the *Impacts of Climate Change on Human Health in the United States: A Scientific Assessment* provided the most recent summary of the research outlining these risks to the United States. This grim summary of risks to human health launches the report:

> Climate change is a significant threat to the health of the American people. The impacts of human-induced climate change are increasing nationwide. Rising greenhouse gas concentrations result in increases in temperature, changes in precipitation, increases in the frequency and intensity of some extreme weather events, and rising sea levels. These climate change impacts endanger our health by affecting our food and water sources, the air we breathe, the weather we experience, and our interactions with the built and natural environments. As the climate continues to change, the risks to human health continue to grow. \(^1\)

This review echoed reports previously produced by several of our organizations: the Asthma and Allergy Foundation of America’s *Extreme Allergies and Global Warming*, issued with the National Wildlife Foundation in 2010\(^2\); the American Public Health Association’s *Climate Change: Mastering the Public Health Role*, in April 2011\(^3\); and the American Thoracic Society’s workshop on *Climate Change and Human Health*, published in 2012\(^4\).

**Millions of Americans suffer greater vulnerability to these threats.** Many people face greater risk or exposure, as documented in the large air pollution science assessments EPA has repeatedly completed. Children court special risks because their bodies are growing and because they are so active.\(^5\) Older adults are more likely to die during high heat events.\(^6\) People with chronic respiratory diseases like asthma and chronic obstructive pulmonary disease, people with cardiovascular diseases and people with diabetes also risk greater harm from increased pollution.\(^7\)

Low-income communities and some racial and ethnic groups are among those who often confront higher exposure to pollutants and who may experience greater responses to such pollution. Many studies have explored the differences in harm from air pollution to racial or ethnic groups and people who are in a low socioeconomic position, have less education, less access to medical care, or live nearer to major pollution sources.\(^8\) Even healthy adults can be affected by increased air pollution, especially if their work requires them to be outdoors, as the study of lifeguards in Galveston, Texas demonstrated.\(^9\)

Many different vulnerable groups and disadvantaged communities, including seniors, children and those with disabilities, will have a harder time responding to the threats, especially if electricity is lost or relocation or evacuation is required.\(^10\) Hurricane Katrina demonstrated that many people in these groups had difficulty evacuating and relocating after a major weather event.\(^11\) Native American and other tribal communities may face threats to food supplies and difficulty relocating due to tribal land locations.\(^12\)

**Reducing GHG emissions from vehicles is critical in the fight against climate change.** Transportation sources produced more than one quarter of the nation’s GHG emissions (26 percent) in 2014. The transportation sector increased those emissions more since 1990 than any other sector, according to EPA.\(^13\) In 2012, the Administration launched a second phase of fleet-wide standards to reduce GHG emissions from cars, light-duty trucks, SUVs and family vans, following up on the first round in 2009. EPA
estimated that these reductions would reduce GHG emissions by 2 billion metric tons in 2025 as manufacturers phased them in beginning in 2017. Combined with vital GHG reductions scheduled for the heavy duty trucking sector, these standards are leading the way to protect against the worst impacts of climate change.

In summary, the proposed determination should be finalized now to facilitate the implementation of the rule for model years 2022-2025. Further, our organizations urge EPA to work with the California Air Resources Board in support of more protective state and federal standards for model year 2026 and beyond.

Sincerely,

American Lung Association
American Lung Association in California
American Public Health Association
American Thoracic Society
Alliance of Nurses for a Healthy Environment
Asthma and Allergy Foundation of America
Asthma and Allergy Network
California Academy of Family Physicians
California Public Health Association – North
Center for Climate Change and Health
Children’s Environmental Health Network
Healthcare Without Harm
National Association of County and City Health Officials
National Environmental Health Association
Physicians for Social Responsibility
Public Health Institute
Regional Asthma Management and Prevention
Sacramento Chapter, Physicians for Social Responsibility
San Francisco Bay Area Chapter, Physicians for Social Responsibility
Trust for America’s Health
9 Thaller EI, Petronell SA, Hochman D, Howard S, Chhikara RS, Brooks EG. Moderate Increases in Ambient PM 2.5 and Ozone Are Associated With Lung Function Decreases in Beach Lifeguards. J Ocpp Environ Med. 2008; 50: 202-211
12 US GCRP, 2016