



December 8, 2023

The President
The White House
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Mr. President:

The undersigned national medical societies and public health and patient advocacy organizations urge you to finalize much stronger National Ambient Air Quality Standards (NAAQS) for fine particulate matter (PM_{2.5}) pollution. The undersigned organizations support EPA finalizing the strongest possible standards by the end of 2023.

The Clean Air Act requires that the NAAQS be set solely based on what the current available science says is necessary to protect public health with an adequate margin of safety. EPA was correct in reconsidering the PM_{2.5} standards following the 2020 review. Overwhelming scientific evidence shows that the current standards are inadequate, putting vulnerable populations at risk and further entrenching environmental injustices in exposure.

The independent experts on the Clean Air Scientific Advisory Committee that advised EPA recommended a range of 8-10 µg/m³ for annual PM_{2.5} and 25-30 µg/m³ for 24-hour PM_{2.5}. Our groups strongly recommend that EPA finalize standards at the lowest ends

of those ranges. PM_{2.5} can increase the risk of heart disease, lung cancer and asthma attacks and can interfere with lung development. It is also associated with increased risks of depression, schizophrenia, and anxiety disorders.¹ Overwhelming evidence shows that both acute and chronic PM_{2.5} exposure is deadly. A 2016 study of individuals 65 and older in New England found that the risk for premature death occurred even in areas that meet the current level.² Clearly, a more health protective standard is needed.

Please ignore the exaggerated claims of the polluting industries. Every time EPA goes through the process of updating the air quality standards, the same arguments get recycled to oppose them – false and exaggerated claims that industry cannot possibly clean up to meet the standards and maps that wildly exaggerate the number of counties that will be in nonattainment. And then, every time EPA finalizes stronger standards and implements them, far fewer areas are designated nonattainment and those same industries, in communities with unhealthy air, actually do clean up and the air gets cleaner.

Once stronger standards are finalized, states work with EPA to determine whether the air in their communities meets the new standards. EPA typically excludes days with high wildfire smoke or other factors outside of the area's control from "counting" toward that determination. For communities where the air does not meet the standards, the state writes and implements a plan to clean up emissions that maintains economic growth. These plans still provide a pathway for the construction of new polluting facilities – they have to make their emissions as low as possible and offset those emissions elsewhere in the community. For communities where the air does meet the standards, new polluting facilities, and existing facilities that make modifications that would increase emissions, have to analyze their likely air quality impact ahead of time and install and operate modern pollution controls.³ These sensible requirements help ensure that people who live near these new facilities are protected.

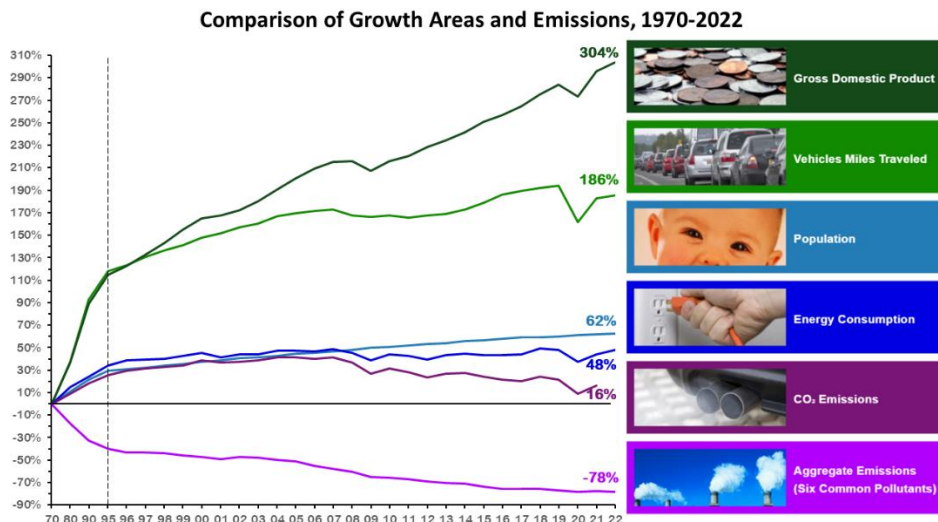
This process under the Clean Air Act has been extraordinarily successful for decades: GDP grew more than 300% from 1970 through 2022, while aggregate pollution of the pollutants covered by the National Ambient Air Quality Standards was reduced by 78%, as shown in this chart prepared by EPA:⁴

¹ Nobile, F., Forastiere, A., Michelozzi, P., Forastiere, F., & Stafoggia, M. (2023). Long-term exposure to air pollution and incidence of mental disorders. A large longitudinal cohort study of adults within an urban area. *Environment International*, 108302.

² Shi L, Zanobetti A, Kloog I, et. al. Low-concentration PM_{2.5} and mortality: estimating acute and chronic effects in a population-based study. *Environ Health Perspect*. 2016;124:46-52. <http://dx.doi.org/10.1289/ehp.1409111>.

³ U.S. EPA. Fact Sheet: NSR Review. [Microsoft Word - NSRBasicsFactSheet103106.doc \(epa.gov\)](https://www.epa.gov/system/files/images/2023-05/Baby%20Graphic%201970-2022.png)

⁴ <https://www.epa.gov/system/files/images/2023-05/Baby%20Graphic%201970-2022.png>



Our groups advocate for the health of the patients and communities we represent. Having to clean up air pollution is not the pressing challenge communities face; air pollution itself is. On their behalf, we urge you to follow the science and the Clean Air Act by finalizing the strongest NAAQS in 2023.

Sincerely,

Allergy & Asthma Network
 Alliance of Nurses for Healthy Environments
 American Heart Association
 American Lung Association
 American Public Health Association
 American Psychological Association
 American Thoracic Society
 Asthma and Allergy Foundation of America
 Children's Environmental Health Network
 Climate for Health
 Climate Psychiatry Alliance
 Medical Society Consortium on Climate and Health
 National Association of Pediatric Nurse Practitioners
 National Environmental Health Association
 National Medical Association

CC: Jeffrey Zients, Chief of Staff, The White House
 Lael Brainard, Director, National Economic Council
 Michael S. Regan, Administrator, Environmental Protection Agency