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Testimony of Paul G. Billings Senior Vice President, Advocacy American Lung Association before the

U.S. Environmental Protection Agency on the proposed Cross-State Air Pollution Update Rule Washington, DC

Docket No. EPA-HQ-OAR-2015-0500

December 17, 2015

Good morning. I am pleased to speak today in support of strengthening the Cross-State Air Pollution Update Rule. My name is Paul Billings. I am Senior Vice President for Advocacy at the American Lung Association. The American Lung Association is the nation's oldest voluntary health organization. Our mission is to save lives by improving lung health and preventing lung disease.

Ground-level ozone pollution, or smog, harms health and causes premature death. Let me repeat: ozone kills. We've known for decades that ozone causes asthma attacks, sending children and adults to seek ER or hospital treatment. Newer evidence has recently linked ozone to low birth weight, cardiovascular problems, and central nervous system problems. The American Lung Association works to protect those who are especially vulnerable to these impacts, including children and adults with asthma and people with Chronic Obstructive Pulmonary Disease.

We are pleased that EPA is moving forward with an updated version of the Cross-State Air Pollution Rule to address what we have called secondhand smog. A strong final rule is vital to protect people in communities that are downwind of polluting sources. However, the proposal must be strengthened if it is to fulfill the Clean Air Act's requirements to protect public health.

First, the proposed rule must be strengthened so that it fully cleans up significant air pollution transported across state lines. As proposed, the rule fails to fully address interstate transport, and, therefore, to comply with the Clean Air Act. The proposal only requires polluting plants to run the emission controls they already have installed. More must be done to protect the air in downwind communities.

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If EPA is concerned that polluting plants lack enough lead time to install new pollution controls by the 2017 compliance deadline, one solution would be to create a phased approach for this rule. EPA could add a "phase 2" with additional time to comply. In this way, EPA could ensure that upwind states clean up the air pollution that impacts downwind states, not merely the pollution that can be reduced by upwind plants running existing controls.

Second, we urge that the final rule not allow the use of emission credits accumulated during the litigation delays that stalled the original Cross-State Air Pollution Rule. These credits are the result of reductions that should have happened between 2012 and 2015. Applying these credits further weakens the potential health benefits of the rule.

The weaknesses in the proposal are exacerbated by the fact that that this rule will implement outdated ozone standards. The 2008 National Ambient Air Quality Standards for ozone, 75 parts per billion, fail to protect human health with an adequate margin of safety. This is why EPA updated the standards to 70 parts per billion earlier this year. And even this level is not fully protective. The American Lung Association has long advocated for an ozone standard of 60 parts per billion, which reflects what the health science shows is necessary to protect the health of children and other vulnerable populations.

We ask EPA to strengthen the proposed rule so that it at least fully cleans up interstate transport, even if that cleanup is based on an outdated standard.

For too long, people in communities across the eastern half of the country have suffered from the health impacts of pollution that blows across state lines. EPA's proposed Cross-State Air Pollution Update is a step in the right direction to protect them from the impacts of ozone pollution. We are pleased to see that the proposed rule would prevent more than 93,000 asthma attacks and nearly 80,000 missed days of work and school every year. On behalf of the American Lung Association and the communities we serve, I call on EPA to achieve even greater health benefits by strengthening the proposal.

Thank you.