Testimony of

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To the U.S. Environmental Protection Agency

on the Primary National Ambient Air Quality Standard for Sulfur Oxides

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Thank you for the opportunity to testify today on the proposed primary standard for sulfur oxides. My name is Janice Nolen and I am National Assistant Vice President for Policy for the American Lung Association. The American Lung Association saves lives through the prevention of lung disease and the promotion of lung health. And as a 114-year old nationwide organization, the Lung Association is committed to the fight for healthy air.

Key to that fight has been our work to support stronger national ambient air quality standards. We recognize the critical role that national air quality standards play—that these standards quite literally drive the work we do as a nation to clean up air pollution and tell the public the truth about air pollution levels that threaten health. The Clean Air Act directs EPA to review the science every five years and to set these standards at levels that protect public health with an adequate margin of safety.

First, we call attention to the thorough review of the science, risk exposure and policy implications that have comprised the process EPA has followed so far. To complete this review, EPA staff followed the well-designed path to complete this review with the assistance of the independent expert advisors on the Clean Air Scientific Advisory Committee. First, EPA staff reviewed the all the available research, including historic clinical trials as well as new published research, in the Integrated Science Assessment with two external review drafts taking comments on both from the public, including the Lung Association. Next, a risk and exposure assessment, followed by a policy assessment: all thorough review documents that identified issues and created the process for a full and open discussion on all the available information. The American public benefits from these full, detailed, scientific reviews to determine the standards that are—as the Clean Air Act states-- "requisite to protect public health" with an "adequate margin of safety." The reviews provide aggregated, vetted, debated, and transparent information for the public to understand. The thorough process allows the public, including researchers and scientists to participate in the establishment of these standards that have led the nation to reduce our most widespread air pollutants. Although the Lung Association has frequently pushed to complete this process in a timely manner, we firmly support the thorough review as an essential process to provide the required protections for public health with an adequate margin of safety.

That margin of safety is a key reason that the Lung Association has long called on EPA to strengthen the NAAQS for SO2. As this review found, the 26.5 million Americans with asthma, including 6.1 million children face higher risks from difficulty breathing, asthma attacks and even hospital and emergency room admissions from breathing SO2. In addition, compelling evidence warns that children and older adults also face higher risks of harm.

The proposal to maintain the current standard relies primarily on the human exposure studies available in the prior review. Their importance is understandable: clinical trial testing eliminates the possible confounding of other pollutants in real world exposures. But they remain seriously limited because of the levels of SO2 used in the studies and the age of the participants. None of those studies had examined exposures below 100 ppb, nor did any –understandably—include young children with asthma, a group that EPA identifies as likely at higher risk than adults with asthma. Nor did any include adults over age 75, a group also found, according to new research, to be at higher risk. Nor did these studies examine the impact of multiple exposures in the same day, a likely event for those living downwind of a major power plant. The law requires EPA to set standards that protect the health everyone from the very young to the elderly with an adequate margin of safety.

In the 2010 review, the Lung Association and our allies argued in support of a stronger standard of 50 ppb for one hour, to provide much more adequate protection to public health. We continue to support a stronger standard to protect millions of Americans from this dangerous pollutant. EPA has data for five-minute exposures and we strongly support the CASAC recommendation that state and local agencies routinely report all five-minute averages to EPA to provide better assessments.

EPA estimated that 3.3 million Americans live in the 40 nonattainment areas which currently remain in nonattainment for the 2010 standard. Millions more Americans live where the sulfur dioxide levels are lower, but still face risk for which they will not receive protection, if EPA retains the 2010 standard.

We urge EPA to reconsider this decision and adopt a one-hour standard of 50 ppb based on the 99th percentile.

Thank you for this opportunity to provide comment.