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Comments from  
**Albert Rizzo, MD, FACP**

Chief Medical Officer  
**American Lung Association**

On the External Review Draft of the  
**Policy Assessment for Ozone and Related Photochemical Oxidants**  
EPA/600/R-19/093

Docket ID No. EPA-HQ-OAR-2018-0279

December 5, 2019

Thank you for the opportunity to speak today. I am Albert Rizzo, MD, Chief Medical Officer for the American Lung Association. I will share a brief summary of the Lung Association’s comments on this draft Policy Assessment (PA). We will submit our full comments in writing.

The American Lung Association does not agree with the finding in the draft PA that the current standard meets the requirement of the Clean Air Act; that is, that it would “protect public health with an adequate margin of safety.”

As during the last review, evidence shows harm to sensitive populations at levels well below the current standard of 70ppb.

- Real-world evidence shows up in two studies of Canadian cities where the ozone levels remained below 70 ppb for 10 years. Even in these cities, where the air quality would have met the current standards, epidemiologists found ozone exposures associated with increased risk of emergency department visits for lower respiratory diseases<sup>1</sup> and for childhood asthma.<sup>2</sup>
- EPA’s own assessment showed the substantial risk to children with asthma even among the cities in the U.S. that just meet the current standard of 70 ppb. In this assessment, approximately 11 percent of children with asthma would be exposed to one or more days when levels reach 60 ppb or higher.<sup>3</sup>

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In a final summary analysis, EPA estimated that the worst case would mean just over three percent of children with asthma, on average, would experience two or more days of ozone above 60 ppb, if that were the official standard. However, the draft PA dismisses that as a small number, basically not worth protecting.<sup>4</sup> We beg to differ. Even at three percent, that means more than 186,000 children with asthma would fail to get the protection the Clean Air Act requires. Nor are they the only at-risk group.

Unfortunately, EPA did not evaluate the impact to the more than 71 million outdoor workers who will be vigorously exposed to unhealthy air at these levels.<sup>5</sup> That at-risk population also deserves protection from the polluted air they breathe, especially since millions of them likely suffer from asthma or other lung diseases.<sup>6</sup>

Finally, as our board members have shared in the previous two hearings, the Lung Association firmly opposes EPA's changes that have undermined and weakened the process. Especially in this constricted ozone review, EPA cannot effectively assess standards that truly protect public health. We do applaud the hard work of the EPA staff in their efforts to meet these unreasonable deadlines and still provide valuable assessments of the information.

In 2014, after reviewing even less available data, the previous CASAC recommended that EPA "set the level of the standard lower than 70 ppb with a range down to 60 ppb."<sup>7</sup> We at the Lung Association urge this CASAC and EPA to recommend a standard no greater than 55 ppb to 60 ppb to protect public health.

Thank you.

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<sup>1</sup> Kousha, T and Rowe, BH (2014). Ambient ozone and emergency department visits due to lower respiratory condition. *Int J Occup Med Environ Health* 27(1): 50-59.

<sup>2</sup> Villeneuve, PJ, Chen, L, Rowe, BH and Coates, F (2007). Outdoor air pollution and emergency department visits for asthma among children and adults: A case-crossover study in northern Alberta, Canada. *Environmental Health: A Global Access Science Source* 6: 40.

<sup>3</sup> U.S. Environmental Protection Agency. 2019. Policy Assessment for the Review of the Ozone National Ambient Air Quality Standards, External Review Draft. pp 3-77 to 3-78.

<sup>4</sup> U.S. EPA, draft PA. p.3-85.

<sup>5</sup> Based on the BLS estimates, roughly 71.2 million adults work outdoors. U.S. Department of Labor Bureau of Labor Statistics (BLS). "Over 90 percent of protective service and construction and extraction jobs require work outdoors.

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January 06, 2017. TED: The Economics Daily. Accessed 11/19/19 at <https://www.bls.gov/opub/ted/2017/over-90-percent-of-protective-service-and-construction-and-extraction-jobs-require-work-outdoors.htm>; BLS, Labor Force Statistics from the Current Population Survey. Household Data Annual Averages. 1. Employment status of the civilian noninstitutional population, 1948 to date. Accessed on 11/19/2019 at <https://www.bls.gov/cps/cpsaat01.htm>.

<sup>6</sup> Among adults 18 and over 5.4% of males and 9.8% of women have asthma. Even with an all-male outdoor workforce, that could mean more than 3.8 million outdoor workers have asthma. Centers for Disease Control and Prevention. National Health Interview Survey, 2017. Analysis by the American Lung Association Epidemiology and Statistics Unit Using SPSS Software.

<sup>7</sup> Letter from Christopher Frey, Chair, Clean Air Scientific Advisory Committee to Gina McCarthy, Administrator, U.S. Environmental Protection Agency. CASAC Review of the EPA's Second Draft Policy Assessment for the Review of the Ozone National Ambient Air Quality Standards. June 24, 2014.