March 03, 2026

Lee Zeldin, Administrator
U.S. Environmental Protection Agency
William J. Clinton Building
1200 Pennsylvania Avenue, NW
Washington DC 20460

Dear Administrator Zeldin:

The mission of the Environmental Protection Agency (EPA) is to protect human health and the environment. In February 2025, EPA announced the agency's new "Powering the Great American

Comeback" Initiative – a 5-pillared roadmap of how the agency would achieve its mission in this administration. The top of that list as Pillar 1 is to provide clean air, land and water for every American. Given this, the undersigned health and medical organizations are perplexed and disappointed by the agency's ongoing dismantling of clean air protections, and particularly its recent announcement that it will no longer count the monetized health costs of air pollution.

For decades, EPA has conducted cost-benefit analyses as part of rulemaking, same as many other federal agencies. These analyses conducted for implementation purposes are integral to regulatory impact analyses that accompany rulemaking. They were mandated through Executive Orders to provide a way to compare expected health benefits against the cost of compliance on the same monetized scale. EPA's approach for quantifying and monetizing health benefits is sound and has long been accepted by environmental scientists and economists on many regulatory review bodies. Abandoning this approach on grounds of uncertainty in estimating benefits while assuming certainty on compliance cost estimates is unjustifiable and ignores the life-saving health benefits of clean air protections.

The evidence is abundantly clear that air pollution kills people, makes chronic disease worse and sends more people to the hospital and emergency room. A literature review endorsed by national health and medical organization details the many documented physical and psychological health harms of air pollution.[1] Particulate matter and ozone –which the agency is apparently no longer estimating health harms from – are two of the most widespread and deadly pollutants. EPA's 2019 Integrated Science Assessment (ISA) concluded that breathing particulate matter ($PM_{2.5}$) causes premature death, cardiovascular harm, likely causes respiratory harm, likely causes cancer, likely causes nervous system harm and may cause reproductive and developmental harm.[2] Additional U.S. studies have found premature deaths at levels even lower than the current standard.[3,4] There is no safe threshold for $PM_{2.5}$ exposure.

EPA's ISA for ozone found that even low levels of ozone pollution can trigger immediate, dangerous health impacts. Exposure contributes to shortness of breath, wheezing and coughing; onset of asthma and asthma attacks; increased risk of respiratory infections; and increased need for people

---

[1] Fueling Sickness: The Hidden Health Costs of Fossil Fuel Pollution. November 2025. www.psr.org/resources/fueling-sickness-the-hidden-health-costs-of-fossil-fuel-pollution/

[2] U.S. EPA, Integrated Science Assessment (ISA) for Particulate Matter (Final Report, 2019). U.S

[3] Shi I., et al. 2016. Low Concentration PM2.5 and mortality; estimating acute and chronic effects in population-based study. Environmental Health Perspectives, 124(1)46-52.

[4] Szyszkowicz M. 2009. Air pollution and ED visits for chest pain, American Journal of Emergency Medicine. 27(2): 165-168; Steib DM, et al. 2009 Air pollution and emergency department visits for cardiac and respiratory conditions: A Multi-city time series analysis. Environmental Health: A Global Science Access Source. 8(25):25; Weichenthal S. et al. 2016; Ambient PM2.5 and risk of emergency room visits from myocardial infarction: Impact of regional PM2.5 oxidative potential: a case-crossover study. Environmental Health. 15:46.; Weichenthal et al., 2016.; PM 2.5 and emergency room vis

with lung disease to require hospital treatment.[5] Researchers have also found a higher risk of death from respiratory diseases associated with increases in ozone,[6] as well as links between ozone and lower birth weight and decreased lung function in newborns.[7]

EPA is arguing that there are uncertainties that cloud the quantification of health benefits and claims that alone is a reason to scrap the approach altogether. However, it is most likely that EPA *undercounts* the health benefits of a rulemaking while *overcounting* compliance costs. For example, within the 2022 proposal to update the Mercury and Air Toxics Standards, EPA stated that it had overestimated the annual compliance costs of the 2012 standards by as much as $7 billion.[8] Meanwhile, the benefits of reduced particulate matter exposure under the MATs proposal were monetized and the benefits of reduced mercury exposure were not, meaning that the total monetized benefits undercounted the full impacts.

EPA has argued that not monetizing the health impacts of pollutants does not mean the agency is no longer considering those health impacts. It is clear, however, that the agency's decision to completely devalue the costs to human health aligns with the overall agenda of rolling back, delaying and eliminating proven health protections. Without this element of rule analysis, EPA is failing to illustrate the true costs and benefits of their own rules.

Too many people are living in areas with poor air quality. The American Lung Association's 2025 "State of the Air" report found that over 156 million Americans live in areas with unhealthy levels of ozone or particulate matter pollution.[9] Families and communities rely on strong EPA safeguards to raise their families, go to work and school, socialize and worship without worrying if exposure to air pollution will land them in the hospital or worse.

By not counting the health costs, EPA is hiding vital information that could save a life. This drastic departure in process tells the public that their kids' asthma attack doesn't matter, their neighbor's hospitalization for a heart attack doesn't count or that a premature death is just the cost of the business of saving polluters money.

---

[5] U.S. EPA, Integrated Science Assessment (ISA) for Ozone and Related Photochemical Oxidants (Final Report), U.S. Environmental Protection Agency, Washington, DC, EPA/600/R20/012, 2020. Available at https://www.epa.gov/isa/integrated-science-assessment-isa-ozone-and-related-photochemical-oxidants.
[6] Jerrett M, Burnett RT, et al. Long-term ozone exposure and mortality. N Engl J Med. 2009: 1085-1095.
[7] Salam MT, Millstein J, Li YF, Lurmann FW, Margolis HG, Gilliland FD. Birth outcomes and prenatal exposure to ozone, carbon monoxide, and particulate matter: Results from the Children's Health Study. Environ Health Perspect. 2005; 113: 1638-1644; Morello-Frosch R, Jesdale BM, Sadd JL, Pastor M. Ambient air pollution exposure and full-term birth weight in California. Environ Health. 2010; 9: 44.
[8] EPA. (April 2023). Regulatory Impact Analysis for the Proposed National Emission Standards for Hazardous Air Pollutants: Coal- and Oil-Fired Electric Utility Steam Generating Units Review of the Residual Risk and Technology Review EPA-452/R-23-002
[9] American Lung Association. State of the Air 2023. April 2023. www.lung.org/sota

We strongly urge the agency to reconsider this approach and return to fully counting the health benefits that come from lifesaving pollution regulations. Return to the core mission of the EPA instead of hiding information for polluters' sake.

Allergy, Asthma & Sinus Center
Alliance of Maine Health Professionals for Climate Action
American Academy of Pediatrics
American Academy of Pediatrics California Chapter 1
American Academy of Pediatrics NYS Chapter 1
American Academy of Pediatrics, CA Chapter 3
American Academy of Pediatrics, California
American Academy of Pediatrics, DC Chapter
American Academy of Pediatrics, Kansas Chapter
American College of Chest Physicians
American College of Physicians
American Lung Association
American Public Health Association
American Thoracic Society
Alliance of Nurses for Healthy Environments
Arizona Chapter of the American Academy of Pediatrics
Arkansas Chapter, American Academy of Pediatrics
Asthma & Allergy Foundation of America, Alaska Chapter
Asthma and Allergy Foundation of America
Breast Cancer Prevention Partners
Breathe Southern California
Carolina Advocates for Climate, Health and Equity
Chesapeake Physicians for Social Responsibility
Children's Environmental Health Network
Climate for Health
Climate Health Civic Health
Climate Health Now
Climate Psychiatry Alliance
Connecticut Health Professionals for Climate Action
CT Public Health Association
Endocrine Society
FreshAir Collective, LLC
Georgia Clinicians for Climate Action
Georgia State Medical Association
Greater Boston Physicians for Social Responsibility
Health Care Without Harm
Health Professionals for a Healthy Climate
Healthy Air and Water Colorado
Healthy Climate Maryland
Healthy Climate New Mexico
Idaho Chapter of the AAP
Idaho Clinicians for Climate and Health
Illinois Chapter, American Academy of Pediatrics
International Society for Environmental Epidemiology- North America Chapter
Kansas Chapter, American Academy of Pediatrics
Maine Chapter, American Academy of Pediatrics
Michigan Chapter - Asthma & Allergy Foundation of America
Michigan Clinicians for Climate Action
Montana Health Professionals for a Healthy Climate
Mothers & Others For Clean Air
Medical Society Consortium on Climate and Health
NAPNAP OC Chapter
NAPNAP Sacramento chapter
NAPNAP San Diego

National Association of Pediatric Nurse Practitioners
National Association of Pediatric Nurse Practitioners Bay Area Chapter
National Environmental Health Association
National League for Nursing
Nevada Clinicians for Climate Action
New Mexico Pediatric Society
New York Clean Air Collective
Oregon Pediatric Society
Oregon Physicians for Social Responsibility
OUCH - Int'l (Oncology Advocates United for Climate and Health International)
Physicians for Social Responsibility
Physicians for Social Responsibility - Kansas City
Physicians for Social Responsibility Maine
Physicians for Social Responsibility Texas
Physicians for Social Responsibility, AZ Chapter
Physicians for Social Responsibility/Florida
PSR Colorado
PSR Iowa Chapter
San Francisco Bay Physicians for Social Responsibility
Society of Behavioral Medicine
Society of Latinx Nurses
St. John's Community Health
The Asthma and Allergy Foundation of America, New England Chapter
Utah Physicians for a Healthy Environment
Virginia Chapter, American Academy of Pediatrics
Washington Physicians for Social Responsibility
Western NC Physicians for Social Responsibility
Wisconsin Asthma Coalition