



June 21, 2021

The Honorable Shalanda Young
Deputy Director
Office of Management and Budget
725 17th Street NW
Washington, D.C. 20503

Submitted via Regulations.gov

RE: Docket No. OMB-2021-09679, Request for Comments: Technical Support Document: Social Cost of Carbon, Methane, and Nitrous Oxide Interim Estimates

Dear Deputy Director Young:

The undersigned national health, medical and nursing organizations appreciate your work to make much-needed updates to the Social Cost of Greenhouse Gases. We urge you to set the final cost at a level that adequately accounts for the enormous health tolls of climate change.

Climate change is a health emergency, and federal actions to limit greenhouse gas emissions are critical to preventing the worst health impacts. Communities across the nation are already experiencing health impacts due to changing climate conditions. Increased levels of ozone and particulate air pollution, driven by heat and wildfires, contribute to asthma attacks, cardiovascular disease and premature death. Extreme weather patterns cause injury, increase physical and mental illness, and reduce access to healthcare. Risk of exposure to vector-borne diseases is increasing due to lengthening of warm seasons and expanding geographic ranges for vectors like ticks, mosquitoes and other disease-carrying organisms. Risk of exposure to waterborne pathogens and algal toxins is also rising, and allergy seasons

are getting longer and more intense. Without swift and strong federal action to slash greenhouse gases, these health impacts will continue to worsen.

Previous estimates of the Social Cost of Greenhouse Gases have fallen far short of accounting for the costs of these health harms. For example, particulate matter is a recognized carcinogen, but previous estimates of the Social Cost of Carbon have failed to account for the increased incidence of lung cancer cases due to increased exposure to wildfire smoke.¹ Previous estimates have similarly failed to include the costs associated with increased cases of Lyme Disease, Zika Virus and other diseases whose ranges are increasing due to climate change.² We appreciate the Working Group's tracking of updated models that better account for the health costs of climate impacts, including allergies, air pollution and extreme heat. The more health impacts of climate change are captured in the damage function, the closer the Social Cost of Greenhouse Gases will be to reflecting the full, enormous cost of the health impacts of climate change.

However, given the numerous health impacts not currently monetized in federal policy benefit-cost analysis, we anticipate that even the most robust incorporation of current health cost models will fail to include every cost of climate-driven health harms. We urge the Interagency Working Group to mitigate this challenge by setting the damage function – and therefore the Social Cost of Greenhouse Gases – at a high enough level to account for physical and mental health impacts that are difficult to quantify, but no less real. We also urge you to consider a lower discount rate that better reflects the long time-horizon of climate health impacts and the fact that if climate change is allowed to continue unchecked, the health impacts will far exceed communities' abilities to adapt to them.

We appreciate the Administration's recognition that many of today's economic models used to calculate the social cost of carbon estimates fail to capture the full scope of health damages. We also appreciate the Administration's willingness to accept additional data and revised economic models to improve the health contribution to social cost of carbon estimates. We urge the Administration to make the needed research investments to further refine our understanding of climate-driven health effects and improve the precision and confidence of our social cost of greenhouse gases economic models.

Finally, we strongly support the Administration's directives to ensure that health equity is built into federal policymaking, including the Social Cost of Greenhouse Gases. Every American's health is already at risk from climate change, but the burden is not shared equally. Children, seniors, pregnant people, low-income communities, communities of color, people with disabilities, people who work outdoors and people with chronic disease disproportionately bear the health impacts of climate change and air pollution. For many in these groups, health impacts from climate change and air pollution compound on other negative social determinants of health and economic analysis often fails to consider the cumulative impact of these burdens. We strongly support the Interagency Working Group incorporating distributional effects of climate change in its work and we urge the Working Group to account for the cumulative impact of climate on specific communities.

¹ McClure CD, Jaffe DA. US particulate matter air quality improves except in wildfire-prone areas. *Proc Natl Acad Sci U S A*. (Jul 31 2018) <https://pubmed.ncbi.nlm.nih.gov/30012611/>

² Scovronick N, Vasquez VN, Errickson F, et al. Human Health and the Social Cost of Carbon: A Primer and Call to Action. *Epidemiology*. (Sep 2019) <https://pubmed.ncbi.nlm.nih.gov/31373934/>

We thank you for your work to update the Social Cost of Greenhouse Gases to better reflect the enormous costs of climate change – and to build the case for the enormous benefits of federal policies to mitigate it. We urge you to ensure that the final cost you set builds in an adequate margin for the many health costs of climate change, including those that are not easily monetized, but no less real.

Sincerely,

Allergy & Asthma Network

Alliance of Nurses for Healthy Environments

American Heart Association

American Lung Association

American Public Health Association

American Psychological Association

Association of Schools and Programs of Public Health

Asthma and Allergy Foundation of America

Children's Environmental Health Network

Climate for Health

Health Care Without Harm

Medical Society Consortium on Climate and Health

Medical Students for a Sustainable Future

National Association of Pediatric Nurse Practitioners

National Hispanic Medical Association

National League for Nursing

Physicians for Social Responsibility