Dear Administrator Johnson:

Fine particulate matter poses one of the greatest public health risks in New Jersey and across the nation. The preponderance of health studies suggest that significant segments of the United States population are experiencing adverse health effects from exposures to ambient concentrations of fine particulate matter (PM$_{2.5}$), even at levels below the current National Ambient Air Quality Standard (NAAQS). The U.S. Environmental Protection Agency (USEPA) has the opportunity to greatly reduce this risk by adopting an appropriately protective NAAQS for fine particles. New Jersey urges you to act decisively on this critical public health issue by decreasing the 24-hr PM$_{2.5}$ standard to 30 μg/m$^3$ and the annual PM$_{2.5}$ standard to 12 μg/m$^3$.

A large portion of the New Jersey population is vulnerable to the detrimental health effects of airborne particulate matter at the concentrations currently measured on many days across the region. Sensitive populations include people with cardiovascular and respiratory conditions, diabetes, the young and the elderly. The most urbanized states, like New Jersey, have asthma rates that are among the highest in the nation, and asthmatics are particularly sensitive to particulate matter.

Given the Clean Air Act's mandate to protect public health—including susceptible populations—with an adequate margin of safety, New Jersey believes that epidemiological and risk assessment evidence clearly supports more stringent PM$_{2.5}$ standards. While both the USEPA and the Clean Air Scientific Advisory Committee (CASAC) have concluded that a more health protective particulate matter standard is warranted.

Based on the weight of evidence of health effects findings and regional demographic and monitoring data, New Jersey believes that a 24-hr PM$_{2.5}$ standard of 30 μg/m$^3$ (98th percentile form) and an annual PM$_{2.5}$ standard of 12 μg/m$^3$ are appropriate to protect public health across the region. These levels are within the range offered in the USEPA Staff Paper and provide an adequate margin of safety for the most sensitive of population as required by law. A requirement to reduce current emissions of PM$_{2.5}$ and its precursors to meet a 12/30 μg/m$^3$ annual/24-hour health standard would not only benefit the New Jersey population, but also benefit all citizens of
the nation, especially those groups that are more sensitive to air pollution. In New Jersey we estimate that two to ten times more premature deaths would be prevented by meeting a 12 µg/m³ annual health standard compared to meeting the 15 µg/m³ level. This translates to 350 to 1,450 more lives saved per year.

Your pending decision relative to revising the NAAQS for particulate matter has long term important public health consequences. A PM$_{2.5}$ NAAQS is needed to address this important public health risk. We urge you to propose the PM$_{2.5}$ standards at the lower end of the range recommended in the USEPA Staff Paper to establish the standard at a level which is clearly protective of public health and the environment. Again, New Jersey strongly supports a 24-hr PM$_{2.5}$ standard of 30 µg/m³ and an annual PM$_{2.5}$ standard of 12 µg/m³.

Sincerely,

[Signature]

Bradley M. Campbell
Commissioner

c:  The Honorable Bill Werhun, Assistant Administrator, USEPA
    The Honorable Alan J. Steinberg, Administrator, USEPA Region II
    The Honorable Peter C. Harvey, Attorney General, State of New Jersey