

6 Everett Street, Suite 5116 Cambridge, MA 02138 617.496.2058 (tel.) 617.384.7633 (fax)

August 20, 2019

By Electronic Submission to Dr. Thomas Armitage, <u>armitage.thomas@epa.gov</u>

Dr. Thomas Armitage
Designated Federal Officer (DFO)
EPA Science Advisory Board (1400R)
U.S. Environmental Protection Agency
1200 Pennsylvania Avenue, N.W.
Washington, D.C. 20460

RE: Written Statement for SAB Public Teleconference on EPA's Proposed Rule, "Strengthening Transparency in Regulatory Science"

Dear Dr. Armitage,

We write on behalf of 32 concerned medical and public health experts, scientists, researchers, and clinicians to urge the Science Advisory Board ("SAB") to conduct a full review of the Environmental Protection Agency's ("EPA") proposal "Strengthening Transparency in Regulatory Science," 83 Fed. Reg. 18,768 (Apr. 30, 2018) ("the Proposal"). The narrow review that Administrator Wheeler has requested is not adequate to address the many troubling implications of the Proposal for the scientific integrity of EPA's decision-making. As explained in a comment letter we submitted to EPA on August 7, 2018 (which we have attached to this letter), the Proposal will result in the exclusion of crucially important public health data from the agency's consideration when setting regulatory standards and will therefore undermine—not strengthen—EPA's decision-making. Given that EPA has stated that it intends to finalize the Proposal by the end of this year, it is critically important that the SAB weigh in on all aspects of the Proposal as soon as possible.

The Proposal, if finalized, would prohibit EPA from basing important regulatory actions on reliable, significant, responsibly-conducted, and best available scientific studies merely because the raw data are not "publicly available in a manner sufficient for independent validation." 83 Fed. Reg. at 18,773. EPA qualifies this requirement, however, by providing that "[w]here the Agency is making data or models publicly available, it shall do so in a fashion that is consistent with law, protects privacy, confidentiality, confidential business information, and is sensitive to national and homeland security." *Id.* This qualification does not address our concerns.

In the comment letter we submitted to EPA last year, we explained that:

The proposed rule will undermine EPA's ability to fulfill its mission to protect human health, safety, and the environment by using the best available information and science. First, the proposed rule would exclude from EPA's consideration any reports, studies, analyses, and models that rely on confidential, inaccessible, or unavailable data but that historically have been considered the best available science and therefore used to support regulations and standards designed to protect public health and safety. Second, in so doing, the rule also eliminates EPA's access to fundamental information necessary for identifying and calculating the "health benefits" of rules and standards needed to protect public health. Finally, it threatens to impose significant costs on both the federal government and independent scientists. Worst of all, the proposed rule creates these multiple problems without providing any significant countervailing benefits.

Other major figures in the scientific community reiterated these criticisms of the Proposal. For example, the editors-in-chief of *Science*, *Nature*, *PLOS*, *PNAS*, and *Cell* published a joint statement explaining that:

It does not strengthen policies based on scientific evidence to limit the scientific evidence that can inform them; rather, it is paramount that the full suite of relevant science vetted through peer review, which includes ever more rigorous features, inform the landscape of decision making. Excluding relevant studies simply because they do not meet rigid transparency standards will adversely affect decision-making processes.¹

Similarly, a coalition of sixty-nine public health, medical, academic, and scientific groups commented that:

If EPA excludes studies because the data cannot be made public, people may be exposed to real harm. The result would be decisions affecting millions based on inadequate information that fails to include well-supported studies by expert scientists. These efforts are misguided and will not improve the quality of science used by EPA nor allow the agency to fulfill its mandate of protecting human health and the environment.²

Since our original submittal, EPA has taken every opportunity to diminish the role of science and scientists in its decision-making. For example, the agency has disbanded the particulate matter review panel, which in the past advised the Clean Air Scientific Advisory Committee on the establishment of National Ambient Air Quality Standards for particulate matter and fine particulates. EPA also terminated the Integrated Risk Information System ("IRIS") assessment for formaldehyde. Of immediate relevance to the Proposal, EPA recently decided not to revoke the existing food tolerances for chlorpyrifos under the Federal Food, Drug, and Cosmetic Act. In

¹ Jeremy Berg, et al., *Joint Statement on EPA Proposed Rule and Public Availability of Data*, Science, Vol. 360, Issue 6388, eaau0116 (2018), https://science.sciencemag.org/content/360/6388/eaau0116.

² Public Health, Medical, Academic, and Scientific Groups Oppose EPA Transparency Rule (July 16, 2018), https://mcmprodaaas.s3.amazonaws.com/s3fs-public/EPA%20Transparency%20Rule%20FINAL.pdf?oNbdIjRo8Ick2LxdMeWaqWuYu4NM3unc.

reaching this decision, EPA identified "the lack of any meaningful raw data from the epidemiologic data that are the centerpiece of this area of inquiry" as the "most significant[]" reason for refusing to act.³ As demonstrated by this decision, even without finalizing the Proposal, EPA is already implementing its principles in its regulatory decisions.

In sum, over the past year, the role of science and reason at EPA have not been strengthened; they have been dismissed. Scientists, public health experts, and the medical community have all been marginalized in EPA's ongoing effort to roll back rules, undermine regulatory standards, and promote business interests over public health and environmental protection.

We urge you to use the August 27, 2019 meeting to push back and remind EPA of its statutory obligations to base its decisions on science—not on business interests or the interest of the President in promoting coal and other fossil fuels. In your capacity as expert advisors, you should urge EPA to withdraw the Proposal and engage in meaningful discussions with you and other experienced members of the scientific and public health communities who have nearly unanimously opposed the proposed rule.

EPA has unlawfully and inappropriately curtailed the role of the SAB. EPA did not consult with the SAB before publishing the Proposal. Only now, more than a year later, after much protest, is EPA allowing limited SAB input. But EPA has wrongfully restricted the SAB's input to one narrow aspect of the Proposal: "mechanisms for secure access to personally identifying information (PII) and confidential business information (CBI) as discussed in the proposed rule consistent with existing laws and policies that protect PII and CBI." The SAB's statutory role is significantly broader. Given the central importance of the Proposal to SAB's mission and EPA's ability to fulfill its statutory duties, and because the Proposal departs from scientific norms, the SAB should weigh in on all aspects of the Proposal.

Thank you for considering these comments and raising these issues with EPA.

Sincerely yours,

Wendy B. Jacobs, Esq.

Emmett Clinical Professor of Environmental Law and Clinic Director

Shaun A. Goho, Esq.

Deputy Director and Senior Staff Attorney

Emmett Environmental Law & Policy Clinic

Harvard Law School

6 Everett Street, Suite 5116

Cambridge, MA 02138

wjacobs@law.harvard.edu

sgoho@law.harvard.edu

³ Chlorpyrifos; Final Order Denying Objections to March 2017 Petition Denial Order, 84 Fed. Reg. 35,555, 35,563 (July 24, 2019).

⁴ Strengthening Transparency in Regulatory Science: Notification of a Public Teleconference of the Chartered Science Advisory Board, 84 Fed. Reg. 38,894, 38,895 (Aug. 8, 2019).

On behalf of:

Marjory A. Bravard MD, Director of Inpatient Medicine, Department of Medicine, Massachusetts General Hospital and Instructor in Medicine, Harvard Medical School

Kathryn S. Brigham MD, Instructor of Pediatrics, Massachusetts General Hospital and Harvard Medical School

Carlos Camargo Jr. MD DrPH MPH, Professor of Emergency Medicine, Massachusetts General Hospital and Harvard Medical School; Professor in the Department of Epidemiology, Harvard T.H. Chan School of Public Health

Douglas Dockery MS ScD, John L. Loeb and Frances Lehman Loeb Research Professor of Environmental Epidemiology, Departments of Environmental Health and Epidemiology; Director, Harvard-NIEHS Center for Environmental Health, Harvard T.H. Chan School of Public Health

Sarah Fortune MD, John LaPorte Given Professor of Immunology and Infectious Diseases, Harvard T.H. Chan School of Public Health; TB Program Director, Ragon Institute of MGH, MIT and Harvard

Philippe Grandjean MD PhD, Adjunct Professor of Environmental Health, Department of Environmental Health, Harvard T.H. Chan School of Public Health

Jaime E. Hart ScD, Assistant Professor of Medicine, Channing Division of Network Medicine, Brigham and Women's Hospital and Harvard Medical School; Assistant Professor, Department of Environmental Health, Harvard T.H. Chan School of Public Health

Christopher Kabrhel MD MPH, Director of Center for Vascular Emergencies, Department of Emergency Medicine, Massachusetts General Hospital and Professor of Emergency Medicine, Harvard Medical School

Ronald E. Kleinman MD, Chief, Department of Pediatrics and Physician-in-Chief at MassGeneral Hospital for Children; Charles Wilder Professor of Pediatrics, Harvard Medical School

David M. Knipe PhD, Higgins Professor of Microbiology and Molecular Genetics and Head of Program in Virology, Department of Microbiology and Immunobiology, Blavatnik Institute, Harvard Medical School

Francine Laden MS ScD, Professor of Environmental Epidemiology and Associate Chair, Department of Environmental Health, Harvard T.H. Chan School of Public Health; Co-Director of the Harvard and Boston University Environmental Disparities Center: Center for Research on Environmental and Social Stressors in Housing Across the Life Course (CRESSH); Member, EPA Chartered Scientific Advisory Board 2012-2017

Regina C. LaRocque MD MPH, Associate Professor of Medicine, Division of Infectious Diseases, Massachusetts General Hospital and Harvard Medical School

Jonathan I. Levy ScD, Adjunct Professor, Department of Environmental Health, Harvard T.H. Chan School of Public Health; Professor and Chair, Department of Environmental Health, Boston University School of Public Health

Sean Levy MD, Attending Physician, Division of Pulmonary, Critical Care & Sleep Medicine, Beth Israel Deaconess Medical Center and Instructor in Medicine, Harvard Medical School

Marc Lipsitch, PhD, Professor of Epidemiology, Departments of Epidemiology and Immunology and Infectious Diseases and Director, Center for Communicable Disease Dynamics, Harvard T.H. Chan School of Public Health

Andrew S. Liteplo MD, Attending Physician and Chief of the Division of Ultrasound in Emergency Medicine, Massachusetts General Hospital; Associate Professor of Emergency Medicine and Director of the Emergency Ultrasound Fellowship, Harvard Medical School

Emily Miller MD, Assistant Professor of Emergency Medicine, Massachusetts General Hospital and Harvard Medical School

Murray A. Mittleman MD DrPH, Professor of Epidemiology, Department of Epidemiology and Faculty Director and Chair, Master of Public Health Program, Harvard T.H. Chan School of Public Health

Kay Negishi MD, Instructor in Medicine, Massachusetts General Hospital and Harvard Medical School

Suzanne Olbricht, MD, Chief, Department of Dermatology, Beth Israel Deaconess Medical Center; Associate Professor of Dermatology, Harvard Medical School; Immediate Past President, American Academy of Dermatology

Peter K. Olds, MD, MPH, Instructor in Medicine, Massachusetts General Hospital and Harvard Medical School

Jim Recht MD, Clinical Assistant Professor of Psychiatry, Cambridge Health Alliance and Harvard Medical School; Clinical Consultant, Department of Psychiatry, Massachusetts General Hospital

Mary Rice MD MPH, Assistant Professor of Medicine, Beth Israel Deaconess Medical Center and Harvard Medical School; Chair of the Environmental Health Policy Committee of the American Thoracic Society

Jeremy B. Richards MD MA, Assistant Professor of Medicine, Division of Pulmonary, Critical Care, and Sleep Medicine, Department of Medicine, Beth Israel Deaconess Medical Center and Harvard Medical School

Jeffrey E. Saffitz, MD, PhD, Chief, Department of Pathology, Beth Israel Deaconess Medical Center and Mallinckrodt Professor of Pathology, Harvard Medical School

Renee N. Salas MD MPH MS, Instructor of Emergency Medicine, Massachusetts General Hospital and Harvard Medical School; Affiliated Faculty, Harvard Global Health Institute

Jonathan E. Slutzman MD, Instructor in Emergency Medicine, Department of Emergency Medicine, Massachusetts General Hospital and Harvard Medical School

Caren Solomon MD MPH, Associate Professor of Medicine, Brigham and Women's Hospital and Harvard Medical School; Deputy Editor, New England Journal of Medicine

Frank E. Speizer MD, Channing Laboratory, Department of Medicine, Brigham and Women's Hospital and Edward H. Kass Distinguished Professor of Medicine, Harvard Medical School

Amy M. Sullivan, EdD, Director for Research, Shapiro Institute for Education & Research, Beth Israel Deaconess Medical Center; Associate Director for Research, The Academy at Harvard Medical School; and Associate Professor of Medicine, Harvard Medical School

Marc Weisskopf PhD ScD, Cecil K. and Philip Drinker Professor of Environmental Epidemiology and Physiology, Departments of Environmental Health and Epidemiology, Harvard T.H. Chan School of Public Health

Walter Willett MD PhD, Professor of Epidemiology and Nutrition, Departments of Nutrition and Epidemiology, Harvard T.H. Chan School of Public Health