## America's Health Organizations Call on the Biden Administration to Ensure that Climate Investments Protect and Promote Health

Dear President Biden, cc: Members of Congress

Thank you for your continued work to make historic climate investments that will immediately benefit the health of Americans and save countless lives in the future. We represent 19 public, environmental, and community-based health organizations and health professionals around the nation, and we are writing to underscore our support for the Clean Electricity Performance Program (CEPP) as a vital strategy to protect the health of Americans.

We understand that there are a variety of proposals to adjust proposed climate investments and programs. We have outlined key principles and recommended priority climate investments that promote health in <u>a letter</u> we recently released, signed by 83 health and medical organizations.

## Below we offer specific suggestions pertaining to ongoing negotiations.

The climate crisis is a health emergency playing out right now in communities across the nation. The latest IPCC report provides definitive scientific evidence that we must act with great urgency to avert irreversible climate change that will be catastrophic to human health and wellbeing. If we fail to act now, our children and grandchildren will inherit a world in which health and well-being will be unattainable for many people, especially for the most vulnerable.

Ambitious policies and investments to attain a rapid transition to clean, safe, renewable, non-combustion energy provide our best opportunity for the US to meet the greenhouse gas emissions reductions required to reduce the health threats of catastrophic climate change and reduce the toll of asthma, heart disease, adverse reproductive outcomes, and neurological impacts of air pollution from fossil fuel combustion.

We urge you to keep the Clean Electricity Performance Program in the Build Back Better Act. As negotiations on the Act continue, we implore you to maintain strong guardrails to achieve climate emissions targets and protect health and equity, including:

**Definition of carbon intensity and payments for fossil fuel facilities with CCS**: To protect public health, clean electricity should continue to be defined as electricity generation with a carbon intensity of less than 0.1 metric tons of carbon dioxide equivalent per megawatt-hour. Allowing dirty energy to qualify for clean energy incentives or payments – for example, through the use of carbon capture and sequestration (CCS) – could have out-sized negative impacts to public health and negate many of the advantages of a clean energy program, because:

a) Facilities that combust fossil fuels emit not only CO2, but also an array of dangerous air pollutants like particulate matter and nitrogen oxides that have serious impacts on communities that already suffer from asthma, heart disease, and other air-pollution

- related illnesses. Some <u>studies</u> have shown that facilities that utilize carbon capture technologies can actually increase their emissions of other harmful air pollutants;
- b) General operations and leaks from CCS equipment, transport, and storage facilities not only increase global levels of greenhouse gases but can also have significant local health impacts and are most likely to impact already overburdened communities; and
- c) Climate change is a health emergency. We need to move as quickly as possible to end our reliance on fossil fuels and move to clean, safe non-combustion renewable energy. Using this program to further subsidize fossil fuel energy through use of CCS reduces investments in and competitiveness of renewables and delays the energy transformation that the world's scientists agree is required to prevent catastrophic climate impacts on our health.

For these reasons, we strongly oppose inclusion of proposals that further incorporate CCS in the CEPP or other policy proposals to transition to clean, non-combustion energy. In the unfortunate circumstance that CCS is included, we suggest that the following provisions be adopted:

- Require that any facilities receiving federal dollars for CCS also implement best available
  technologies to reduce emissions of toxic air contaminants and priority air pollutants
  alongside CO2 emissions reductions, and that monitoring of such air pollutants be
  comprehensive and transparent.
- 2. Prohibit the ability to qualify for payments if load-serving entities use CCS for improving or increasing their extraction of fossil fuels (e.g. use of captured CO2 in enhanced oil recovery).
- 3. Ensure that CO2 transport mechanisms and storage facilities demonstrate implementation of monitoring capable of detecting even small CO2 leaks from storage facilities, in the near future and long-term.
- 4. Ensure that companies who receive any subsidies for CCS maintain full and forever liability for the health and environmental impacts of leaks from CO2 storage facilities and CCS infrastructure.
- 5. Set a cap on the use of "clean energy" incentives for CCS in fossil fuel facilities (e.g. no more than 20%).

Use of voluntary cap and trade emissions policies with carbon offsets: We are also troubled by reports that negotiators are considering the introduction of a voluntary emissions trading system for some manufacturers in lieu of the CEPP. Our concerns about this strategy include accumulating evidence that accepted methodologies for quantifying carbon credits in emissions trading overstate impacts on climate change mitigation and that cheap offsets offer large polluters an alternative to reducing air pollution emissions that adversely impact community health. Any program that allows the use of carbon offsets must contain strong provisions to ensure real and permanent emissions reductions and prevent disproportionate pollutant exposures in already impacted communities.

**Putting a price on greenhouse gas emissions:** We understand that negotiators may also now be considering introducing a price on carbon in lieu of the CEPP. If this becomes necessary to reach an agreement, we support the establishment of a level playing field for clean, non-combustion renewable energy by removing direct and indirect fossil fuel subsidies and putting a price on greenhouse gas emissions that reflects true social costs. A price on emissions that does not incorporate the true social costs – including current and future health costs – will not be sufficient to address the climate crisis. And a carbon price cannot be the sole strategy to address the harms of fossil fuel combustion to reduce carbon emissions.

We understand the importance of negotiating to ensure that these investments in climate and infrastructure ultimately move forward. However, we believe a strong program to support the transition to clean non-combustion renewable energy – such as the CEPP – is the most critical investment for public health. We have a collective obligation to ensure that our solutions to the climate crisis do not exacerbate the health harms and health inequities in communities that have already borne the brunt of fossil fuel use for decades, and that we support America's miners and fossil fuel workers and their communities as we transition to a healthy and sustainable economy. We urge you to ensure that any alternatives or changes to the CEPP incorporate safeguards sufficient to protect public health and equity, and to ensure that the U.S. meets greenhouse gas emissions reductions sufficient to prevent catastrophic climate impacts.

Thank you for your continued work on this critical agenda which will save countless lives in the coming decades.

Sincerely,

## Health Organizations (listed below)

- Academy of Integrative Health & Medicine
- African Heritage Physician Assistant Caucus
- Alliance of Nurses for Healthy Environments
- · American Association for Community Psychiatry
- Children's Environmental Health Network
- · Climate Health Now
- · College of Urgent Care Medicine
- Columbia University, Mailman School of Public Health
- · Human Impact Partners
- · Medical Society Consortium on Climate & Health
- · Medical Society of Delaware

- · Montana Health Professionals for a Healthy Climate
- National Network of Public Health Institutes
- National Student Nurses' Association, Inc.
- · North Carolina Clinicians for Climate Action
- · Physicians for Social Responsibility
- Physicians for Social Responsibility, San Francisco Bay
- · Public Health Institute
- · Respiratory Health Association
- · Utah Physicians for a Healthy Environment
- Wisconsin Health Professionals for Climate Action









































