August 28, 2026

Administrator Lee Zeldin
U.S. Environmental Protection Agency
1200 Pennsylvania Avenue NW
Washington DC 20004

Re: EPA's Proposed Rule: Amendments and Nonconformance Penalties for Model Year 2027 and Later Heavy-Duty Highway Engines and Amendments to Inducement Provisions for SCR-Equipped Diesel Engines (Docket ID EPA-HQ-OAR-2026-0728)

Dear Administrator Zeldin,

The undersigned health and medical organizations call on the U.S. Environmental Protection Agency (EPA) to rescind the proposed weakening of health-protective operating standards for heavy duty diesel trucks. Diesel trucks represent a major threat to local health and regional air quality. Weakening the protections offered by the existing emissions control rules will negatively impact health. We call on EPA to instead implement the current standards to protect and improve health against trucking pollution.

For decades, EPA has set and enforced cost-effective, technologically feasible standards that have worked to reduce exposures to diesel exhaust, fine particles and ozone pollution among other harmful pollutants. Despite this progress, more than 40 percent of people living in the United States are still impacted by ozone and/or particle

pollution – over 152 million people, including 33 million children – according to the American Lung Association's "State of the Air" 2026 report.[i] Ozone and particle pollution cause a wide range of health harms, including asthma attacks and hospitalizations, cardiovascular illness including heart attacks and strokes, and premature death.[ii] Particle pollution contributes to lung cancer, and diesel exhaust is known to contain dozens of carcinogens.

Trucks represent a small share of the nation's on-road fleet but generate a major share of its pollution, and with it, burdens on regional air quality and local health. EPA has estimated that 72 million people live in close proximity to U.S. trucking routes, making them more likely to experience the harmful effects of diesel pollution exposures, including heart and lung disease, lung cancer and premature death.[iii] [iv]

Current EPA standards adopted in 2023 rely on readily available technology and, upon full implementation, are expected to reduce NOx emissions from diesel-powered vehicles by 47% in 2045 and prevent up to 2,900 premature deaths annually, with net public health benefits reaching $29 billion.[v]

The undersigned organizations urge EPA to rescind the proposal to weaken the implementation of these standards, which would reduce these lifesaving health benefits. Specifically, we highlight the following ways the proposed rule falls short of what is needed to protect public health:

Lack of health analysis
As noted above, EPA analyzed that the 2023 rule would have clear benefits to health. However, the agency has not included a similarly robust health cost analysis in this proposal, despite the fact that the scientific basis for doing so is well-established. Further, EPA acknowledges that the agency did not conduct a comprehensive emissions analysis of this proposal, and the limited instances of analysis show increases in harmful pollutants. The failure to quantify and monetize health impacts of increases in emissions makes these impacts no less real. We are further concerned that while EPA did not conduct a health impact analysis, the proposal does include an analysis on industry costs – despite the fact that EPA's mission is to protect human health and the environment, and that Administrator Zeldin's first pillar for the agency is clean air, land and water for every American.

Weakening emissions control warranty
The existing standards included provisions that lengthened the required warranty periods for emissions control equipment, to support prompt correction of excess emissions caused by faulty equipment. Health organizations strongly supported longer warranty periods to ensure that emissions control equipment keeps working for more of the life of the vehicle.

EPA has now proposed cutting existing consumer warranty protections from a 10-year/450,000-mile period back to the previous requirement of 5-year/100,000 miles. With this change, the proposal acknowledges that emissions will spike. With

manufacturers no longer responsible for the durability of emissions controls under the appropriate, existing warranty periods, EPA notes that tens of thousands of tons of smog-forming emissions will occur annually that would have otherwise been addressed by manufacturers via recalls, repairs and replacement of faulty equipment. What's more, while the agency's press materials with this proposal say this change is "sparing Americans from unnecessary warranty costs,"[vi] we expect that costs of faulty equipment will shift to consumers.

Delaying useful life provisions for emissions equipment
The proposal takes a similarly concerning approach by delaying requirements intended to ensure that vehicle emission controls achieve compliance over a more realistic operational useful life. EPA's proposed three year delay to implement more representative vehicle lifespans up to 650,000 miles, which are weaker than the million-mile standard health organizations called for in the existing rule, postpones deployment of more durable emission controls and real-world health benefits.

Allowing operation with faulty emission controls
We also oppose the provision of the proposal that would eliminate engine performance reductions ("derates") caused by faulty or poorly maintained emission controls. For NOx emissions control systems to function properly, drivers need to maintain diesel exhaust fluid levels in their vehicles. Currently, the existing standards send a clear signal for drivers of the real-time need to maintain diesel exhaust fluid needed for functional NOx controls: engines will slow down if emission controls are not functional, helping ensure that emissions issues are fixed promptly. EPA's proposal would replace this process with an audible signal in the cab instead, which our organizations expect would be less likely to ensure issues with the emissions controls are addressed promptly.

Beyond the elimination of derates for new engines, we are also deeply concerned by EPA inviting comments on whether to eliminate derates for older, higher-polluting on-road engines and off-road equipment. By allowing operation without assurances that emission controls and DEF levels are maintained and functional to achieve standards and fuel savings in the real world, EPA's proposal could lead to significantly higher emissions and to broader engine failures, especially if this harm is multiplied across legacy fleets. What's more, EPA did not analyze any emissions impact associated with this provision in the proposal.[vii]

Allowing non-compliance without addressing excess NOx emissions
The existing standards allow manufacturers to certify up to 5 percent of their fleet sales to the previous standards with the caveat that offset NOx reductions would balance any excess emissions. In the current proposal, EPA would eliminate the need to submit NOx credits to balance against excess emissions that will occur. EPA must not eliminate credit requirements, should lower the percentage of allowable non-compliance, and must not extend this flexibility beyond the 2027 model year.

Non-Compliance Penalty provisions
EPA has proposed allowing manufacturers to pay non-compliance penalties in exchange for selling non-compliant engines, rather than comply with the new standards. This flexibility proposal allows companies to delay new technology deployment needed to meet the new standards, and is especially concerning if viewed as an ongoing compliance option rather than a short-term catch-up provision. EPA has requested comment on the penalty schedule, which we believe must ramp aggressively after the initial transition period to ensure that there is no viable economic case for selling non-compliant vehicles instead of, or in tandem, with compliant options.

The undersigned health and medical organizations urge EPA to withdraw this proposal. It would eliminate and weaken health protections from diesel exhaust. This would increase exposure to air pollution from a sector that is already disproportionately polluting, increasing the risk for health harms and the subsequent associated medical costs. Instead, we call on EPA to protect the health of American families by implementing the existing standards on the intended timeline.

Alaska Public Health Association
Allergy & Asthma Network
Alliance of Nurses for Healthy Environments
American Academy of Pediatrics
American Academy of Pediatrics, California Chapter 1
American Academy of Pediatrics, Virginia Chapter
American College of Chest Physicians
American Lung Association
American Public Health Association
American Thoracic Society
Arizona Chapter of the American Academy of Pediatrics
Arizona Health Professionals for Climate Action
Asthma and Allergy Foundation of America
Children's Environmental Health Network
Climate Health Now
Climate Psychiatry Alliance
Clinicians for Climate Action New Jersey
Connecticut Health Professionals for Climate Action
EcoHealth Texas
Greater Boston Physicians for Social Organization
Hawai'i Public Health Association
Health Professionals for a Healthy Climate
Idaho Clinicians for Climate and Health
Illinois Chapter, American Academy of Pediatrics
Illinois Public Health Association
International Society for Environmental Epidemiology-North America Chapter
Kansas Chapter, American Academy of Pediatrics
Maine AAP

Maine Climate and Health Alliance
Maryland Chapter, American Academy of Pediatrics
Medical Students for a Sustainable Future (MS4SF)
Michigan Clinicians for Climate Action
Montana Health and Climate
Mothers & Others for Clean Air
Medical Society Consortium on Climate and Health
National Association of Pediatric Nurse Practitioners
National Medical Association
Nevada Public Health Association
NH Healthy Climate
NY Clinicians for Climate Action
Oncology Advocates United for Climate and Health - International
Oregon Physicians for Social Responsibility
Pennsylvania Public Health Association
Physicians for Social Responsibility
Physicians for Social Responsibility Colorado
Physicians for Social Responsibility Florida
Physicians for Social Responsibility Maine
Physicians for Social Responsibility Texas
Protect Penn-Trafford
San Francisco Bay Physicians for Social Responsibility
Vermont Public Health Association
Western NC Physicians for Social Responsibility

---

[i] American Lung Association. “State of the Air” 2026. April 2026. www.lung.org/research/sota
[ii] US EPA. “Research on Health Effects from Air Pollution” https://www.epa.gov/air-research/research-health-effects-air-pollution May 2026.
[iii] US EPA. Fact Sheet. “Heavy-Duty 2027 and Beyond: Clean Trucks Final Rulemaking” December 2022. https://nepis.epa.gov/Exe/ZyPDF.cgi?Dockey=P101695R.pdf
[iv] California Air Resources Board. “Summary: Diesel Particulate Matter Health Impacts”. Accessed Aug. 2026. https://ww2.arb.ca.gov/resources/summary-diesel-particulate-matter-health-impacts
[v] US EPA. Fact Sheet. “Heavy-Duty 2027 and Beyond: Clean Trucks Final Rulemaking” December 2022. https://nepis.epa.gov/Exe/ZyPDF.cgi?Dockey=P101695R.pdf
[vi] US EPA. Press Release “Trump EPA Unveils Proposal to…” July 9, 2026. Press release link.
[vii] US EPA. Draft Regulatory Impact Analysis at page p.9. July 2026. https://www.epa.gov/system/files/documents/2026-06/420d26002.pdf