

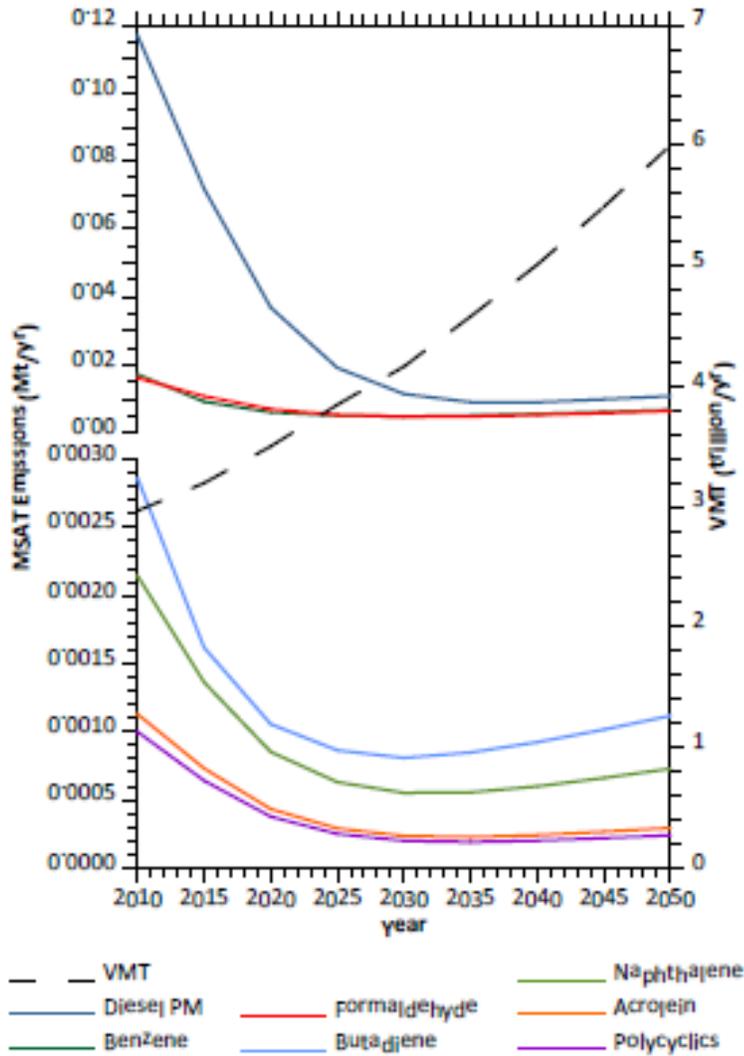


Appendix B. MSAT Incomplete Information



Figure descriptions for the images in this appendix have been provided as alternative text usable by accessibility software. If needed, additional figure interpretation for this appendix is available from the ODOT Senior Environmental Project Manager at (503) 731-4804.

**Figure 1:
PROJECTED NATIONAL MSAT EMISSION TRENDS 2010 – 2050
FOR VEHICLES OPERATING ON ROADWAYS
USING EPA'S MOVES2010b MODEL**



Note: Trends for specific locations may be different, depending on locally derived information representing vehicle-miles travelled, vehicle speeds, vehicle mix, fuels, emission control programs, meteorology, and other factors

**CEQ Provisions Covering
Incomplete or Unavailable Information (40 CFR 1502.22)**

Sec. 1502.22 INCOMPLETE OR UNAVAILABLE INFORMATION

When an agency is evaluating reasonably foreseeable significant adverse effects on the human environment in an environmental impact statement and there is incomplete or unavailable information, the agency shall always make clear that such information is lacking.

(a) If the incomplete information relevant to reasonably foreseeable significant adverse impacts is essential to a reasoned choice among alternatives and the overall costs of obtaining it are not exorbitant, the agency shall include the information in the environmental impact statement.

(b) If the information relevant to reasonably foreseeable significant adverse impacts cannot be obtained because the overall costs of obtaining it are exorbitant or the means to obtain it are not known, the agency shall include within the environmental impact statement:

1. A statement that such information is incomplete or unavailable;
2. A statement of the relevance of the incomplete or unavailable information to evaluating reasonably foreseeable significant adverse impacts on the human environment;
3. A summary of existing credible scientific evidence which is relevant to evaluating the reasonably foreseeable significant adverse impacts on the human environment; and
4. The agency's evaluation of such impacts based upon theoretical approaches or research methods generally accepted in the scientific community. For the purposes of this section, "reasonably foreseeable" includes impacts that have catastrophic consequences, even if their probability of occurrence is low, provided that the analysis of the impacts is supported by credible scientific evidence, is not based on pure conjecture, and is within the rule of reason.

(c) The amended regulation will be applicable to all environmental impact statements for which a Notice to Intent (40 CFR 1508.22) is published in the Federal Register on or after May 27, 1986. For environmental impact statements in progress, agencies may choose to comply with the requirements of either the original or amended regulation.

**INCOMPLETE OR UNAVAILABLE INFORMATION FOR PROJECT-SPECIFIC MSAT
HEALTH IMPACTS ANALYSIS**

In FHWA's view, information is incomplete or unavailable to credibly predict the project-specific health impacts due to changes in MSAT emissions associated with a proposed set of highway alternatives. The outcome of such an assessment, adverse or not, would be influenced more by the uncertainty introduced into the process through assumption and speculation rather than any genuine insight into the actual

health impacts directly attributable to MSAT exposure associated with a proposed action.

The U.S. Environmental Protection Agency (EPA) is responsible for protecting the public health and welfare from any known or anticipated effect of an air pollutant. They are the lead authority for administering the Clean Air Act and its amendments and have specific statutory obligations with respect to hazardous air pollutants and MSAT. The EPA is in the continual process of assessing human health effects, exposures, and risks posed by air pollutants. They maintain the Integrated Risk Information System (IRIS), which is “a compilation of electronic reports on specific substances found in the environment and their potential to cause human health effects” (EPA <https://www.epa.gov/iris/>). Each report contains assessments of noncancerous and cancerous effects for individual compounds and quantitative estimates of risk levels from lifetime oral and inhalation exposures with uncertainty spanning perhaps an order of magnitude.

Other organizations are also active in the research and analyses of the human health effects of MSAT, including the Health Effects Institute (HEI). Two HEI studies are summarized in Appendix D of FHWA’s Interim Guidance Update on Mobile Source Air Toxic Analysis in NEPA Documents. Among the adverse health effects linked to MSAT compounds at high exposures are: cancer in humans in occupational settings; cancer in animals; and irritation to the respiratory tract, including the exacerbation of asthma. Less obvious is the adverse human health effects of MSAT compounds at current environmental concentrations (HEI, <http://pubs.healtheffects.org/view.php?id=282>) or in the future as vehicle emissions substantially decrease (HEI, <http://pubs.healtheffects.org/view.php?id=306>).

The methodologies for forecasting health impacts include emissions modeling; dispersion modeling; exposure modeling; and then final determination of health impacts—each step in the process building on the model predictions obtained in the previous step. All are encumbered by technical shortcomings or uncertain science that prevents a more complete differentiation of the MSAT health impacts among a set of project alternatives. These difficulties are magnified for lifetime (i.e., 70 year) assessments, particularly because unsupportable assumptions would have to be made regarding changes in travel patterns and vehicle technology (which affects emissions rates) over that time frame, since such information is unavailable.

It is particularly difficult to reliably forecast 70-year lifetime MSAT concentrations and exposure near roadways; to determine the portion of time that people are actually exposed at a specific location; and to establish the extent attributable to a proposed action, especially given that some of the information needed is unavailable.

There are considerable uncertainties associated with the existing estimates of toxicity of the various MSAT, because of factors such as low-dose extrapolation and translation of occupational exposure data to the general population, a concern expressed by HEI (<http://pubs.healtheffects.org/view.php?id=282>). As a result, there is no national consensus on air dose-response values assumed to protect the public health and welfare for MSAT compounds, and in particular for DPM. The EPA

(<http://www.epa.gov/risk/basicinformation.htm#g>) and the HEI (<http://pubs.healtheffects.org/getfile.php?u=395>) have not established a basis for quantitative risk assessment of DPM in ambient settings.

There is also the lack of a national consensus on an acceptable level of risk. The current context is the process used by the EPA as provided by the Clean Air Act to determine whether more stringent controls are required in order to provide an ample margin of safety to protect public health or to prevent an adverse environmental effect for industrial sources subject to the maximum achievable control technology standards, such as benzene emissions from refineries. The decision framework is a two-step process. The first step requires EPA to determine an “acceptable” level of risk due to emissions from a source, which is generally no greater than approximately 100 in a million. Additional factors are considered in the second step, the goal of which is to maximize the number of people with risks less than 1 in a million due to emissions from a source. The results of this statutory two-step process do not guarantee that cancer risks from exposure to air toxics are less than 1 in a million; in some cases, the residual risk determination could result in maximum individual cancer risks that are as high as approximately 100 in a million. In a June 2008 decision, the U.S. Court of Appeals for the District of Columbia Circuit upheld EPA’s approach to addressing risk in its two-step decision framework. Information is incomplete or unavailable to establish that even the largest of highway projects would result in levels of risk greater than deemed acceptable.

Because of the limitations in the methodologies for forecasting health impacts described, any predicted difference in health impacts between alternatives is likely to be much smaller than the uncertainties associated with predicting the impacts. Consequently, the results of such assessments would not be useful to decision makers, who would need to weigh this information against project benefits, such as reducing traffic congestion, accident rates, and fatalities plus improved access for emergency response, that are better suited for quantitative analysis.

Because of the limitations cited, a discussion such as the example provided in this appendix (reflecting any local and project-specific circumstances) should be included regarding incomplete or unavailable information in accordance with Council on Environmental Quality (CEQ) regulations [40 CFR 1502.22(b)]. The FHWA Headquarters and Resource Center staff Victoria Martinez (787) 766-5600 X231, Bruce Bender (202) 366-2851, and Michael Claggett (505) 820-2047 are available to provide guidance and technical assistance and support.

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