

1 HOUSE JOINT RESOLUTION NO. 42

2 INTRODUCED BY T. WINTER

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4 A JOINT RESOLUTION OF THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE STATE OF
5 MONTANA REQUESTING AN INTERIM STUDY TO EVALUATE OPTIONS TO PROMOTE AND SECURE
6 MORE TIMELY AND EFFECTIVE AIR QUALITY MONITORING AND AIR FILTRATION METHODS TO
7 INCREASE CITIZENS' ACCESS TO CLEANER AND HEALTHIER INDOOR AIR DURING WILDFIRE SMOKE
8 SEASONS.

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10 WHEREAS, according to the United State Department of Agriculture, wildland fire exposes firefighters
11 and citizens to a variety of hazardous chemicals and inhalation irritants, including carbon monoxide, sulfur
12 dioxide, aldehydes, crystalline silica, and mercury; and

13 WHEREAS, wildfire smoke contains known carcinogens, such as benzene, which can overwhelm the
14 body's ability to repair damage to genes and deoxyribonucleic acid; formaldehyde, which can lead to lymphatic
15 cancers and brain tumors; and polycyclic aromatic hydrocarbons, which are linked to lung, bladder, liver, and
16 stomach cancers; and

17 WHEREAS, wildfire smoke contains fine particulate matter that irritates the respiratory system and can
18 enter the bloodstream, where it sets off a systemic inflammatory response; and

19 WHEREAS, wildfire smoke can create hazardous conditions for all affected citizens, particularly for
20 vulnerable populations including infants and children, the elderly, people with heart or lung disease, and pregnant
21 women; and

22 WHEREAS, complications associated with asthma and chronic obstructive pulmonary disease, including
23 increased medication use, more frequent visits to physicians and emergency departments, and increased
24 hospitalizations, are more common in areas with poor air quality due to wildfire smoke; and

25 WHEREAS, there is growing evidence of a link between wildfire smoke and respiratory infections such
26 as pneumonia and bronchitis; and

27 WHEREAS, multiple studies have shown a negative causal relationship between the learning ability of
28 children and poor air quality in the learning environment; and

29 WHEREAS, public health practitioners and emergency managers are faced with the task of protecting
30 the public from the threat of smoke- and fire-related illness; and

1 WHEREAS, the Montana Department of Environmental Quality has established standards for determining
2 the potential harm of poor air quality using a range of categories that include healthy, moderate, unhealthy for
3 sensitive groups, unhealthy, very unhealthy, and hazardous; and

4 WHEREAS, may health complications, including an increased risk of aggravation of heart or lung disease,
5 cardiopulmonary disease, and premature mortality, are considered potential health effects for citizens
6 experiencing air quality considered unhealthy for sensitive groups, unhealthy, very unhealthy, or hazardous
7 according to the Department of Environmental Quality; and

8 WHEREAS, most buildings in Montana lack sufficient heating, ventilation, and air-conditioning units and
9 air purifiers to adequately remove unhealthy levels of fine particulate matter during high wildfire smoke events;
10 and

11 WHEREAS, the residents of Seeley Lake were exposed to levels of fine particulate matter considered
12 unhealthy to hazardous for 43 days during the summer of 2017; and

13 WHEREAS, the Mountain West and Great Plains areas are likely to suffer the highest exposure to wildfire
14 smoke in the future; and

15 WHEREAS, the average large fire duration has increased from 8 days to 37 days, increasing the duration
16 communities could be exposed to unhealthy levels of wildfire smoke; and

17 WHEREAS, research suggests that the use of high-performance in-duct media filters can substantially
18 lower indoor fine particulate matter concentrations and help maintain healthy air quality for vulnerable populations,
19 including the young, the elderly, pregnant mothers, and those with existing conditions; and

20 WHEREAS, research suggests that the use of home clean air shelters or community clean air shelters
21 can substantially reduce the health risks associated with wildfire smoke; and

22 WHEREAS, the number of outdoor and indoor air monitors in the state is insufficient to adequately
23 respond to a growing health problem that carries the potential of hazardous long-term effects on Montana's
24 citizens.

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26 NOW, THEREFORE, BE IT RESOLVED BY THE SENATE AND THE HOUSE OF REPRESENTATIVES OF THE
27 STATE OF MONTANA:

28 That the legislative council be requested to designate an appropriate interim committee or statutory
29 committee, pursuant to section 5-5-217, MCA, to:

30 (1) gather, analyze, and assess information and documentation related to wildfire smoke filtration for both

1 residential and commercial buildings in Montana;

2 (2) identify the current air filtration status of publicly owned buildings in smoke-impacted areas;

3 (3) solicit and consider comments, concerns, and suggestions from all interested stakeholder groups

4 to determine methods to incentivize wildfire smoke adaptation for private, public, and commercial enterprises;

5 (4) develop best practices recommendations for residential, commercial, and public facilities and include
6 a plan for disseminating related information;

7 (5) develop recommendations for improved indoor and outdoor air monitoring; and

8 (6) if appropriate, develop a committee bill to update or revise related state laws based on the
9 committee's study findings and recommendations.

10 BE IT FURTHER RESOLVED, that all aspects of the study, including presentation and review
11 requirements, be concluded prior to September 15, 2020.

12 BE IT FURTHER RESOLVED, that the final results of the study, including any findings, conclusions,
13 comments, or recommendations of the appropriate committee, be reported to the 67th Legislature.

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