



To Protect, Promote, and Prioritize the Health of our Entire Community

Midtown Campus, 1111 South 41st Street, Omaha, Nebraska 68105

Healthy. Vibrant.
Everyone. Everywhere.

December 14, 2025

Omaha Public Power District (OPPD) Board of Directors
Omaha Public Power District (OPPD) CEO Javier Hernandez
1919 Aksarben Drive
Omaha, NE 68106

SUBJECT: Official Opposition to Continuing Coal Burning Unit Operations and Request for Increased Health/Air Quality Monitoring in North Omaha

Dear Members of the Board and Mr. Hernandez,

As the Director of the Douglas County Health Department, I am writing to express opposition to the continued operation of coal burning units within the Omaha Public Power District's service area. This opposition is rooted in our department's primary mandate to protect and promote the health, safety, and well-being of all residents of Douglas County, particularly those most vulnerable to environmental health risks.

Continuing the operation of coal-fired generation represents a clear detrimental impact to human health, exacerbates existing health inequities, and imposes an unacceptable burden on specific communities, most notably North Omaha. While the recently published ESRI report assessing the human health risks did consider modeled estimates of exposures and health impact, it did so in a vacuum. The assessment did not take into consideration cumulative health risks of coal burning along with other existing pollution generators nearby, such as Eppley Airfield and several high-volume roads and highways. It also did not consider the levels of existing health conditions in the North Omaha community that may be worsened even with pollution limits that appear to be within EPA guidelines. Given this, along with the expert testimony presented by public health experts from well-respected public health institutions as was heard at Creighton's public event on December 9th, I strongly recommend discontinuing the use of the remaining coal burning units at the North Omaha Station in favor of cleaner, more efficient methods.

Impacts on Human Health

The health impacts of continued coal combustion are undeniable and well-documented by public health authorities nationwide. Emissions from coal units—including fine particulate matter, sulfur dioxide, nitrogen oxides, and heavy metals like mercury—are recognized public health hazards.

Fine particulate matter (PM2.5) penetrates deep into the lungs and enters the bloodstream, triggering severe cardiovascular and respiratory diseases. The Harvard T.H. Chan School of Public Health has found that mortality risk associated with coal may be **double** the risk from other sources, due to the unique toxicity profile of coal emissions¹. The Omaha Metro's 2024 Community Health Assessment reveals that Northeast Omaha carries 26% higher rates of heart disease and 37% higher rates of asthma than the combined metro area². According to the Asthma and Allergy Foundation of America (AAFA) reports, Omaha ranks 9th in the top 10

¹ Harvard T.H. Chan School of Public Health (2023). Particulate pollution from coal associated with double the risk of mortality than PM2.5 from other sources. <https://hsphs.harvard.edu/news/particulate-pollution-from-coal-associated-with-double-the-risk-of-mortality-than-pm2-5-from-other-sources/>

² Douglas County Health Department, et al (2025). 2024 community health needs assessment for Douglas, Sarpy & Cass Counties, Nebraska, and Pottawattamie County, IA. Retrieved from <https://thewellbeingpartners.org/wp-content/uploads/2025/01/2024-PRC-CHNA-Report-Metro-Omaha.pdf>

most challenging places to live for people with asthma, a burden that is disproportionately carried by communities of color and low-income populations³.

Emissions contribute directly to the onset and aggravation of chronic conditions such as asthma, Chronic Obstructive Pulmonary Disease (COPD), bronchitis, and lung cancer. Research published in the *European Respiratory Journal* confirms a strong association between exposure to air pollution from coal plants and decreased lung function in both children and adults⁴. Northeast Omaha suffers 25% higher rates of COPD than the combined metro area².

The proximity of industrial sources, including the North Omaha Station, places a higher, unjust environmental load on residents who already face systemic barriers to healthcare access and quality nutrition. 41.2% of Northeast Omaha residents surveyed reported food insecurity, versus only 27.8% of the combined metro area².

For a community with statistically higher rates of chronic respiratory illnesses and cardiovascular disease, as is the case in North Omaha, even *low-level* chronic exposure to coal pollution poses an unacceptable amplification of existing health risks. The cumulative impact of industrial pollution combined with socioeconomic stress creates a 'double jeopardy' for residents. I request that the board of OPPD consider cleaner, safer, and more economical power choices that do not worsen the disparities in health and wellbeing experienced by the North Omaha community.

Request for Partnership

Should the OPPD Board vote to continue running coal burning units, I request a partnership between OPPD and the Douglas County Health Department (DCHD) to ensure public accountability and health protection:

1. **Increase Capacity for Hyper-Local Monitoring:** OPPD should fund additional state-of-the-art air quality monitoring stations and air quality monitoring personnel within the North Omaha community. DCHD offers to site and monitor sensors with the addition of one Air Quality Specialist. This hyper-local data is essential to accurately characterize the true level of community exposure, which is often missed by regional monitors.
2. **Ensure Public Data Transparency:** In partnership with OPPD, DCHD offers to establish a transparent mechanism for the immediate, real-time public publication of all collected air quality data from sensors placed in the vicinity of the North Omaha Station. This data will be easily accessible and understandable by the community and will be linked to health outcome surveillance data managed by DCHD.
3. **Fund Health Mitigation and Capacity:** I also recommend that OPPD establish an ongoing, dedicated fund, administered by DCHD, to address the respiratory and cardiovascular health impacts caused by the facility's emissions in the surrounding North Omaha area. This fund will support DCHD's capacity for enhanced disease surveillance, screening, and targeted health intervention programs.

The decision before the OPPD Board is a public health decision, and efficient energy options are available that can balance the energy needs of the community with the health of the surrounding neighborhoods. I urge you to adopt a proactive, health-protective stance by voting to discontinue the operation of coal burning units and accelerate the transition to cleaner energy sources.

DCHD anticipates your favorable consideration of this urgent public health matter and looks forward to your response outlining your plan of action. I am available for any questions or discussions you wish to have.

Sincerely,



Lindsay Huse, MPH, DNP
Director, Douglas County Health Department

³ Asthma and Allergy Foundations of America (2020). Asthma capitals 2019. Retrieved from <https://www.aafa.org/wp-content/uploads/2022/10/aafa-2019-asthma-capitals-report.pdf>

⁴ Adam et al (2014). Adult lung function and long-term air pollution exposure. ESCAPE: a multicentre cohort study and meta-analysis. *European Respiratory Journal*, 45(1): 38-50; DOI: <https://doi.org/10.1183/09031936.00130014>.

1111 S. 41st Street
Omaha, NE. 68105
Lindsay.huse@douglascounty-ne.gov