Congress of the United States

Washington, DC 20515

April 1, 2025

Honorable Robert F. Kennedy, Jr., Secretary U.S. Department of Health and Human Services 200 Independence Ave. SW Washington, D.C. 20201

Dear Secretary Kennedy

We write to express our profound concern for the health and safety of our constituents following the recent decision by the Department of Health and Human Services (HHS) to cut 10,000 employees and dismantle or consolidate several health agencies, including the Centers for Disease Control and Prevention (CDC). HHS is integral to protecting the health of Americans and providing critical services and resources, including Medicare and Medicaid, food and drug safety, and medical.

On the morning of March 27th, reports surfaced that 10,000 HHS workers would be fired, including the removal of 3,500 full-time employees from the Food and Drug Administration (FDA), 2,400 employees from the CDC, 1,200 employees from the National Institutes of Health (NIH), and 300 employees from Centers for Medicare & Medicaid Services (CMS). As of this morning, HHS layoffs have officially begun, making our concerns even more prevalent. The estimated job cuts, in conjunction with recent voluntary departures, mean that your Administration will have removed a quarter of the Department's workforce without justification or explanation for how our constituents will benefit from these cuts. Make no mistake, we have no faith that these drastic cuts will benefit the American people. We are concerned that this will ultimately lead to slowdowns in service, approvals, and research, and impacts to public health response capabilities.

Millions of Americans rely on Medicare, Medicaid, and other healthcare services and funding provided by HHS and its affiliates. Any delay in these services and funding would have drastic consequences for our most marginalized communities. Despite claims that FDA layoffs will not impact inspectors or drug, medical device, or food reviewers, prior layoffs by the Department of Government Efficiency (DOGE) to the FDA are reported to already have caused staff to struggle to meet deadlines. Right now, we are facing rising measles and avian flu cases, and public health officials are actively working to contain the spread of these viruses and continue research into treatment and prevention options. Further cuts to the workforce could contribute to additional delays in service and benefits to CMS program recipients, slower and less effective public health breakthroughs, and a slower and less effective response to disease outbreaks. How will you guarantee that lifesaving medical research, American families, and our infectious disease response will not suffer from this reduction in force?

Your proposal to eliminate the Administration for Community Living (ACL) and redistribute its programs to the Administration for Children and Families (ACF), Assistant Secretary for Planning and Evaluation (ASPE), and CMS also raises significant concerns. Millions of older adults, caregivers, and people with disabilities, particularly in underserved communities, receive services from this important agency. Half of older Americans who struggle with daily tasks do not receive the support they need; your order is likely to make this worse, both by reducing the support that seniors receive and undermining the supply of caregivers, placing a harsher financial burden on senior citizens and their families. **HHS must continue to provide support for seniors,**

caregivers, and people with disabilities who are in need of access to healthcare and human services offered by the ACL.

Your recent proposal also includes a consolidation of the Office of Civil Rights (OCR), Medicare Hearings and Appeals (OMHA), and Departmental Appeals Board (DAB). Each office you intend to merge has a unique and important role: OCR is imperative to preserve adherence to federal civil rights laws and privacy laws, so that constituents are provided crucial protections against any mistreatment when receiving HHS benefits. The OMHA gives Medicare recipients the opportunity for redress when their coverage and benefits are inaccurate or insufficient. And, DAB offers impartial and independent review of broad jurisdiction regarding compliance with CMS policy, fraud and abuse claims, and appeals in Medicare payment cases. Merging these fully distinct offices could erode the independent decision-making processes of these offices and inhibit their ability to offer our constituents protections they are legally entitled to. Given the Trump Administration's broad intentions to eviscerate civil rights protections to harm Black and brown communities, as well as proposals to slash funding for social safety net programs, we have no faith that this restructure will result in improved protections for our constituents' civil rights or their hard-earned and critically needed medical coverage. How will you ensure this restructuring will improve the protections our constituents deserve and not further delay critical adjudications?

Furthermore, you have announced intentions to consolidate the Office of the Assistant Secretary for Health (ASH), Health Resources and Services Administration (HRSA), Substance Abuse and Mental Health Services Administration (SAMHSA), Agency for Toxic Substances and Disease Registry (ATSDR), and National Institute for Occupational Safety and Health (NIOSH) under the proposed Administration for a Healthy America (AHA). ASH is responsible for disease prevention, human research protections, HIV/AIDS policy, minority health, women's health, and maternal health. Consolidating the offices specifically devoted to each of these issues and cutting much of their staff sends a clear message that these are not healthcare issues worthy of significant attention. We find that appalling. Please provide clarity on how consolidation of these offices and a reduction in force will not diminish the capacity of these offices.

As Black and brown communities continue to face severe healthcare disparities, it is crucial that access to affordable healthcare is not reduced in any way, but rather prioritized and improved, and research is undertaken to develop tailored solutions to these problems Moreover, in light of pervasive attempts to restrict access to sexual and reproductive healthcare for women, LGBTQ+ communities, and people of color, and increasing racial gaps in maternal health outcomes, your efforts to further deprioritize these offices is likely to further deprive our constituents of healthcare targeted to their needs, including HIV/AIDS care, maternal healthcare, minority healthcare, and women's healthcare. **Please provide clear and explicit justification for the devaluing of these agencies and their work.**

We strongly urge you to reconsider your plans to downsize the HHS workforce and dismantle or consolidate the existing agencies.

Thank you for your attention to this matter, and we look forward to your timely response.

Sincerely,

Nikema Williams Member of Congress

Salud Carbajal Member of Congress

O.C.l.

Steve Cohen Member of Congress

Veronica Escobar Member of Congress

Curica Groban

Jared Huffman Member of Congress

Julie Johnson Member of Congress

Sarah McBride Member of Congress Donald S. Beyer Jr. Member of Congress

Emanuel Cleaver, II Member of Congress

Danny K. Davis
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Sylvia R. Garcia
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