

United States Senate

WASHINGTON, DC 20510

April 1, 2025

The Honorable Robert Kennedy, Jr.
Secretary of Health and Human Services
200 Independence Avenue SW
Washington, DC 20201

Dear Secretary Kennedy:

We write regarding your announcement on March 27, 2025 outlining mass terminations and a sweeping reorganization of the U.S. Department and Health and Human Services (HHS). Your plan to eliminate 20,000 HHS employees and consolidate core agencies is an unprecedented and baseless assault on the federal workforce and the hundreds of millions of Americans who rely on the Department's services.

Your actions continue to show a reckless disregard for the health and well-being of American families, most significantly for underserved communities. You claim this "reduction in force" will "make America healthy again." But firings of this scale will do the exact opposite. If you do not reverse course, you will do irreparable damage to our nation's human services, health care delivery, public health, and scientific infrastructure – making Americans sicker and leaving our communities ill-prepared for future threats.

As you are aware, most of the firings across the federal government that have occurred to date in response to President Trump's February 11, 2025 Executive Order titled, *Implementing the President's "Department of Government Efficiency" Workforce Optimization Initiative*, have been invalidated by federal courts. Thousands of federal workers across the country have been fired at the direction of Elon Musk and the so-called Department of Government Efficiency (DOGE), only to be asked to return, either because their firings were illegal or because HHS later determined the work they perform is essential.

Despite Elon Musk's best efforts to convince the American people otherwise, DOGE has not identified any meaningful fraud, waste, or abuse in government programs. Nor has DOGE improved government efficiency. Instead, DOGE has disrupted access to health care and human services, eliminated funding for critical research into cures for cancer and caused chaos and confusion across the country. This latest effort will no doubt be more of the same.

The importance of the work at HHS cannot be understated. Every single day, HHS' work has a direct effect on the health, well-being, and livelihoods of millions of Americans. Your actions will endanger children, seniors, people with disabilities, American Indians, Alaska Natives, Native Hawaiians and other at-risk communities, set medical progress back by decades, curtail patient access to care, weaken health care in rural and other underserved communities, and severely impact the nation's public health and preparedness capacity.

These cuts worsen the harm you are already inflicting on seniors, people with disabilities, and other vulnerable communities. Dismantling and effectively eliminating the Administration for Community Living (ACL) will suffocate direct oversight and support for community-based services for seniors and people with disabilities. These cuts will disrupt the services and supports that help keep 11 million seniors healthy at home and in their communities, including the provision of over 220 million meals. All Americans – including people with disabilities and seniors – should be able to live at home with the supports they need participating in their communities. Eliminating ACL and its staff when already under-staffed will undermine programs and services that these at-risk communities rely on each day.

These cuts worsen the harm you are already inflicting on children. Further cuts to the Administration for Children and Families (ACF) will make child care less safe, less affordable, and harder to find for millions of working-class families. Without adequate HHS staff, Head Start programs will have less support to attract and retain staff, serve local families and children, and provide comprehensive health, nutrition, and educational services. ACF will also be unable to provide their other core functions which include preventing child abuse and human trafficking, helping families pay home heating and cooling bills, and supporting foster care children and grandfamilies, among other essential work. Cuts to these agencies will bring direct harm to vulnerable populations across the country.

These cuts worsen the backlogs you have already created in the development of new treatments and cures. Firing thousands of staff across the Food and Drug Administration (FDA) and National Institutes of Health (NIH) will slow the development of new treatments and cures for cancer and rare diseases, and impact Americans' ability to access safe and effective medications. Firing NIH employees reduces America's capacity to support biomedical research and may hinder our ability to respond effectively to emerging health challenges. Terminating grants already in progress will lead to widespread setbacks in scientific advancement and abandon years of tax-payer investment midstream. This is not efficient.

FDA staff keep dangerous drugs and unsafe food off the market. Americans trust that drugs are effective to take and food is safe to eat, not because we believe the claims of Big Pharma and Big Food, but because we trust independent public scientists. In addition, FDA staff are responsible for more than reviewing new drugs and inspecting facilities to ensure the safety of medical products, food, cosmetics, and dietary supplements, as well as the regulation of tobacco products. They also conduct ongoing surveillance of harms reported from parents, physicians, and consumers, enforcement actions against bad actors, and independent development of new diagnostic tools to advance medical breakthroughs.

Finally, your plan to eliminate the Agency for Healthcare Research and Quality (AHRQ) ignores its record of lowering health care costs, reducing medical errors, and improving patient outcomes. The elimination of AHRQ's work will lead to more Americans becoming sick and dying earlier.

These cuts weaken access to primary medical care and dismantle the backbone of our current primary care system. At a time when Americans are dying because they cannot afford

to see a doctor, dismantling the Health Resources and Services Administration (HRSA) is shockingly shortsighted. HRSA operates the community health center program that provides high-quality primary medical, dental, and mental health care to over 32 million Americans, including Native Hawaiians. HRSA's community health center programs *save* Medicare and Medicaid money, because providing primary care and keeping people healthy and out of hospitals and nursing homes is cost-effective.

These cuts leave communities entirely unprepared to manage ongoing public health concerns and emerging threats. Firing thousands of staff across the Centers for Disease Control and Prevention (CDC) will put American lives and health at risk through the loss of CDC's critical prevention work and efforts to reduce the leading causes of death, disability, and injury. In focusing CDC's mission solely on infectious diseases, Americans will lose access to chronic disease prevention programs across the country, including breast and cervical screening services for low-income women, which provided screenings for 1.5 million women over a five-year period. Additionally, as part of the larger re-organization of the agency, these cuts will devastate state and local health departments who are on the front lines of promoting and protecting Americans' health. Lastly, cuts to CDC's National Institute for Occupational Safety and Health (NIOSH), as part of the larger HHS reorganization, puts workers across the country at risk. NIOSH staff prevent work-related injuries and illnesses among the nation's 164 million workers – these injuries cost our economy \$250 billion annually.

These cuts worsen the effects of the opioid epidemic and affect access to life-saving mental health services. Cuts to the Substance Abuse and Mental Health Services Administration (SAMHSA) will put American lives at risk. As the leading agency for mental health and substance use disorder prevention, treatment, and recovery, SAMHSA administers and oversees a wide range of grant programs, including the 988 Suicide Crisis Lifeline. This bipartisan program operates a 24/7/365 call-in number to provide services and resources to those in need of rapid suicide prevention and crisis intervention services. Over 10 million people used the 988 hotline last year, saving countless lives. Created by Congress, in part to combat the opioid epidemic that is destroying lives, SAMHSA has also played a critical role in the steep decline of overdose deaths, the first reduction in years. Over 20 million people rely on SAMHSA-funded mental health and substance use disorder services, and cuts to the SAMHSA workforce will put Americans at risk of losing services for overdose, suicide, and other crises.

These cuts worsen existing health disparities in Native communities. The federal government has a fundamental obligation to fulfill its trust responsibilities to Tribal Nations and the Native Hawaiian Community – an obligation that includes providing health care services. While the Indian Health Service is responsible for serving 2.8 million American Indians and Alaska Natives, agencies within the Department, including HRSA, NIH, CDC, and SAMHSA, also work to provide health care services pursuant to the federal trust responsibility. Staffing cuts to any of these agencies will harm Tribes and the Native Hawaiian Community. Furthermore, HHS has a responsibility to engage in *meaningful* consultation with Native communities prior to making any staffing or reorganization efforts that will impede the Department's ability to meet its fundamental legal obligations, a requirement that has not occurred to date.

These cuts worsen the heightened risks you have created for patient care and safety. Firing hundreds of staff across the Centers for Medicare & Medicaid Services (CMS) will put patient care at risk and could delay payments to hospitals and doctors. Over 160 million Americans rely on CMS programs for health coverage through Medicare, Medicaid, the Children's Health Insurance Program (CHIP), and the Affordable Care Act (ACA) Marketplaces. The cuts that have taken place to date have eliminated staff responsible for conducting audit and compliance activities, ensuring safety in our nation's nursing homes, hospitals, and other settings, providing coverage for innovative therapies, and developing payment models that improve care and lower costs for patients. Your claim that decreasing the CMS workforce by 300 employees "will not impact Medicare and Medicaid services," without explanation, is unfathomable and incorrect. Additional workforce cuts at CMS will put the agency's essential, life-saving work at risk.

Your decision to close five of the ten HHS regional offices across the country will eliminate the ability of millions of Americans to engage directly with these agencies when they need support or assistance, forcing federal workers out of stable employment and harming local economies. These regional offices provide direct support to states and individuals and serve as the Department's eyes and ears on the ground to ensure that programs and services are operating as intended and serving the people who rely on them. Your plan explicitly notes that these closures will include the elimination of hundreds of staff responsible for supporting Medicare beneficiaries by holding providers and health plans accountable to federal requirements.

In addition to the mass firings and closures that will be occurring across HHS, the decision to dismantle agencies and relocate critical oversight and audit responsibilities under the leadership of political appointees will allow this Administration to continue to politicize oversight and enforcement activities undermining legitimate efforts to address waste, fraud, and abuse in our health care programs. These agency cuts, on the back of firing the HHS Inspector General, will make it more difficult for dedicated career staff to leverage their expertise to conduct program integrity efforts without undue influence and unnecessary delay. Furthermore, the consolidation of the Office for Civil Rights (OCR) into an agency to fight "waste fraud and abuse" leaves patients and providers without critical protections. OCR enforces our nation's federal civil rights laws as well as health privacy and patient safety laws. Those protections of American's fundamental rights of nondiscrimination, conscience, religious freedom, and health information privacy cannot be diluted. Any consolidation or de-prioritization of the vital work of OCR will harm patients' access to health and human services.

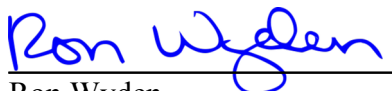
Despite repeated requests from members of Congress, including all signers of this letter, you have not provided any meaningful information related to the Department's decision-making or the impacts it will have on HHS programs. Most notably, members of Congress have not received any information on the processes or assumptions you are relying on to measure the impact of the reorganization of the Department and these firings will have on the programs and services hundreds of millions of Americans rely on. Even worse, you continue to deny visibility to the American public, despite your oft-repeated commitment to "radical transparency." You have promised that HHS will do more for the American people, at a lower cost to the taxpayer, yet you have not provided anything to substantiate these claims, despite repeated requests from Congress to do so.

The American people deserve the “radical transparency” you have repeatedly promised them, yet failed to deliver at every opportunity. As such, we request responses to the following questions by April 4, 2025.

1. How many HHS employees have been fired since January 20, 2025? Provide a complete breakdown by agency and position type. For each category of employee at each agency, provide information on GS level and veteran status, and clearly state the justification for termination. Include employees who have since been reinstated or placed on administrative leave, noting that change in status. In the only briefing provided to Senate committee staff, HHS noted that this number is ever-changing, and HHS has not provided a briefing to the full Senate caucus despite repeated requests. Please provide the latest data available.
2. How many additional employees do you intend to fire following the announcement made on March 27, 2025?
3. How will HHS employees be notified that they are being fired? Provide the method of communication and the content of the message employees will receive.
4. Provide any analysis conducted prior to the reorganization and firings of HHS employees to determine the immediate and long-term impact it will have on programs and activities that those employees are tasked with administering. Provide specifics on the health care, human services, or other supports that these employees deliver to Americans.

In addition to a written response, we request a detailed, staff-level briefing from the individuals responsible for developing and executing this reorganization and reduction in force plan at HHS. We expect that senior representatives from the HHS Office of the Secretary will make themselves available for questions.

Sincerely,



Ron Wyden
United States Senator
Ranking Member, Committee
on Finance



Bernard Sanders
United States Senator
Ranking Member, Committee
on Health, Education, Labor,
and Pensions



Mark R. Warner
United States Senator



Charles E. Schumer
United States Senator



Angela Alsobrooks
United States Senator



Tammy Baldwin
United States Senator



Jack Reed
United States Senator



Richard J. Durbin
United States Senator



Tammy Duckworth
United States Senator



Christopher A. Coons
United States Senator



Jeanne Shaheen
United States Senator



Kirsten Gillibrand
United States Senator



Chris Van Hollen
United States Senator



Mazie K. Hirono
United States Senator



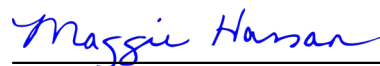
Amy Klobuchar
United States Senator



Martin Heinrich
United States Senator



Peter Welch
United States Senator



Margaret Wood Hassan
United States Senator



Jeffrey A. Merkley
United States Senator



Sheldon Whitehouse
United States Senator



Ruben Gallego
United States Senator



Elizabeth Warren
United States Senator



Catherine Cortez Masto
United States Senator



Jacky Rosen
United States Senator



Richard Blumenthal
United States Senator



Cory A. Booker
United States Senator



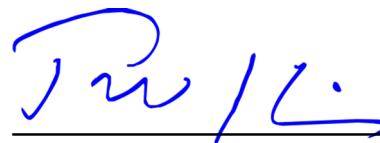
Tina Smith
United States Senator



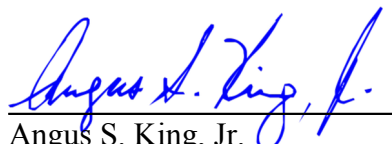
Raphael Warnock
United States Senator

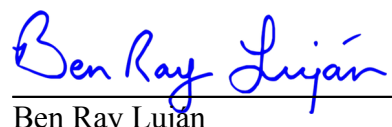



Adam B. Schiff
United States Senator

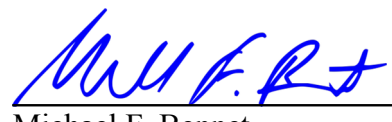


Tim Kaine
United States Senator

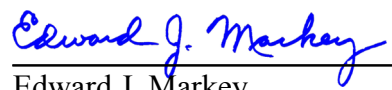

Angus S. King, Jr.
United States Senator

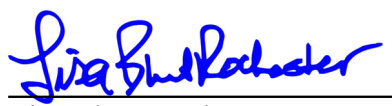

Ben Ray Lujan
United States Senator

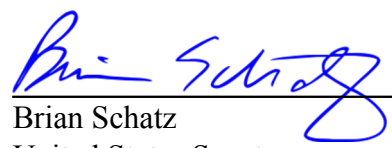

Alex Padilla
United States Senator


Michael F. Bennet
United States Senator


John Hickenlooper
United States Senator


Edward J. Markey
United States Senator


Lisa Blunt Rochester
United States Senator


Brian Schatz
United States Senator