

United States Senate

WASHINGTON, DC 20510

February 19, 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 the recent decision by the Trump Administration to fire thousands of employees across the U.S. government through the Executive Order, *Implementing the President's "Department of Government Efficiency" Workforce Optimization Initiative*, which circumvents Congressional authority. These actions have already resulted in the Department of Health and Human Services (HHS) reportedly firing more than 5,000 employees – and counting – at agencies across the country.¹ This attack on the HHS workforce undermines the agency's programs and exposes a blatant disregard for the health and safety of the American people.

HHS includes thirteen operating divisions and ten agencies responsible for protecting the health and well-being of Americans nationwide. Its programs are run by highly-qualified, dedicated public servants who protect our nation from public health threats, advance scientific innovation and breakthrough cures, deliver health care services to millions of American families, and provide critical, life-sustaining services, such as energy assistance, child care, home-delivered meals for seniors, and more.

According to reports, employees have been fired indiscriminately and without justification at the Food and Drug Administration (FDA), Centers for Disease Control and Prevention (CDC), National Institutes of Health (NIH), Administration for Strategic Preparedness and Response (ASPR), and Centers for Medicare & Medicaid Services (CMS), among other vital agencies, including the Administration for Children and Families (ACF), Administration for Community Living (ACL), Health Resources and Services Administration (HRSA), and the Substance Abuse and Mental Health Services Administration (SAMHSA). These uninformed, baseless firings will reportedly continue across HHS under your leadership.² The Trump Administration is firing staff and harming programs that Americans rely on every day, and these arbitrary cuts will endanger children, seniors, and at-risk communities, set medical progress back by decades, curtail patient access to care, and make the nation less prepared for emerging public health threats.

¹ <https://apnews.com/article/trump-job-cuts-health-cdc-0d002fd6f528a7b91ced79628bf68196>

² <https://apnews.com/article/trump-job-cuts-health-cdc-0d002fd6f528a7b91ced79628bf68196>;

<https://www.axios.com/2025/02/14/federal-health-jobs-cut-trump-hhs>

<https://www.washingtonpost.com/nation/2025/02/14/federal-employee-firings-effects-trump-doge/>

These cuts harm children, seniors, people with disabilities, and other vulnerable communities.

Agencies across HHS are responsible not only for Americans' health, but also for delivering services that allow Americans to work, live, and age with dignity. Largely administered by ACF and ACL, HHS' human services programs provide parents with affordable child care, offer home-delivered meals to isolated seniors, prevent child and elder abuse and human trafficking, help families pay home heating and cooling bills, offer case management and other supports to people with disabilities and their families, give foster children a safe place to live, and much more.

HRSA-supported Community Health Centers provide high-quality, affordable primary care to over 30 million people and employ over 226,000 people across the country to provide training to health professionals in rural and underserved communities. HRSA also fulfills the federal government's federal trust responsibility to the Native Hawaiian community through funding for the Native Health Care Systems. Firing essential employees in these HRSA programs and other HHS programs will harm at-risk communities, and worsen the lives of children, seniors, and people with disabilities nationwide.

These cuts block the development of new treatments and cures. Firing FDA and NIH staff will delay the development and approval of life-saving treatments, leaving patients with fewer options and longer waits for breakthrough therapies. FDA approves approximately 50 new drugs each year, but depleting the FDA and NIH workforce means fewer life-saving medicines will make it to market. NIH-supported clinical trials, which pave the way for cutting-edge gene therapies, cancer immunotherapies, and antiviral treatments, will face delays, leaving millions of patients without access to the next generation of medical innovation. Reports indicate that 129 employees - many of them early-career scientists - were fired from the National Cancer Institute, which will set back treatments and cures for pediatric and other forms of cancer. Cancer patients will wait longer for promising new treatments as clinical trials stall due to staffing shortages. Research into Alzheimer's disease and ALS will slow, delaying critical advances for families already facing little time. Innovation in diabetes, heart disease, and mental health treatments will be pushed back, leaving millions without access to cutting-edge care. Rare disease research - often entirely dependent on NIH funding - will suffer, closing off potential breakthroughs for patients who have no other options.

These cuts will not only set back current research efforts, they will also drive scientific talent away from federal service, weakening the nation's leadership in biomedical science for years to come. The Trump Administration has already executed targeted firings and forced resignations of key scientific leadership, and the loss of talent, knowledge, and experience caused by mass firings and forced resignations at our nation's health agencies is sowing chaos at HHS and putting American lives at risk. Replacing non-partisan career scientists and staff and injecting politics deep into HHS will undermine confidence in the work coming from the Department and its agencies. For the millions of Americans who depend on medical innovation - not only in the future, but today - these cuts aren't just about a budget, they are the difference between life and death.

These cuts put patient care at risk. 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) Marketplace, and CMS is responsible for distributing approximately \$1.5 trillion in health care payments each year.³ CMS is already understaffed and leans heavily on its existing workforce to maintain current service levels. The agency has not received a meaningful increase in program operations funding since at least 2014, even as health care and operational costs have continued to grow.⁴ Despite that challenge, the CMS workforce remains incredibly efficient, carrying out its obligations while keeping administrative costs to 0.67 percent of its total obligations in Fiscal Year 2023.⁵

Any cuts to the CMS workforce could have wide-ranging consequences across the health care system, including potential disruptions in medically necessary care, delays in payments to hospitals, nursing homes, and other health care providers, and reductions in the frequency of safety inspections in nursing homes. These cuts will also undermine HHS’ ability to serve taxpayers and carry out its statutory obligations established by legislation enacted during the previous two administrations, including work to protect consumers from surprise medical bills, implement hospital and insurance transparency requirements, and negotiate lower prescription drug prices for people with Medicare.

Cuts at SAMHSA threaten continued access to essential mental health and substance use services, including crisis support and suicide prevention. In just the last three years, HHS has continuously expanded upon services provided through 988, the nation’s premier suicide and crisis hotline. Baseless and indiscriminate cuts to HHS staffing threatens this progress, which will endanger at-risk populations, including veterans and LGBTQIA+ youth.

Through the Indian Health Service (IHS), HHS provides health care to tribal communities, supporting a robust hospital system serving around 2.8 million American Indians and Alaska Natives. Reporting suggests that HHS has actively considered plans to fire hundreds of clinicians from an already understaffed system.⁶ This chaos endangers patient access for Native communities and undermines the federal government’s trust and treaty obligations to Tribal Nations.⁷ Any cuts to clinicians serving these populations are dangerous and will undoubtedly put lives at risk.

The layoffs reportedly also include significant cuts to HRSA, including staff hired to support the modernization of the Organ Procurement and Transplantation Network. These layoffs will set back this life-saving work for the 100,000 Americans waiting on an organ transplant despite the funding Congress provided specifically for this work.

³ <https://www.cms.gov/files/document/cms-financial-report-fiscal-year-2024.pdf>

⁴ <https://www.cms.gov/files/document/fy2025-cms-congressional-justification-estimates-appropriations-committees.pdf>

⁵ <https://www.cms.gov/files/document/fy2025-cms-congressional-justification-estimates-appropriations-committees.pdf>

⁶ <https://www.mprnews.org/story/2025/02/17/rfk-jr-rescinds-indian-health-service-layoffs>

⁷ https://www.abqjournal.com/news/article_de1a3c14-eb34-11ef-b42f-bf59fd6adf7f.html

These cuts make the nation less prepared. HHS is on the frontlines of keeping Americans safe by ensuring that the country is prepared to identify and respond to threats quickly. With the worst flu season in over 15 years resulting in school closures in at least 10 states, an outbreak of Ebola in Uganda, and the growing threat of Avian Influenza, laying off CDC staff will allow more diseases to affect our communities. CDC provides vital support to states and local health departments across the country, including through the Public Health Associate Program, the current class of which was laid off on Friday. Targeting early career researchers and scientists in particular will weaken our capacity to detect and respond to public health threats and find cures for deadly diseases both now and in the future.

Public health crises also require a strong NIH to develop vaccines and treatments. The COVID-19 vaccine, developed with NIH support, saved 14.4 million lives⁸ in just one year. These Trump Administration cuts will leave us vulnerable to the next pandemic, putting millions at risk. They will also threaten the ability of FDA to keep contaminated food, and dangerous drugs and devices, off the market, increasing the risk for preventable hospitalizations and death.

HHS also supports a broader public health response infrastructure, including through ASPR and other agencies, to respond to other pressing threats like natural disasters, acute supply chain shortages, and emerging cyber attacks. Such threats undercut the durability of our nation's health care system and present grave risks to patient access, whether to hospital care, emergency room care, or needed prescription drugs. Firing HHS employees tasked with threat assessment and rapid response puts the American people in danger.

The flawed approach to these indiscriminate firings appears to have been informed at least in part by the unauthorized access to internal HHS data and payment systems given to individuals associated with the so-called Department of Government Efficiency (DOGE).⁹ These individuals were not vetted for security risks, and do not possess any relevant health care knowledge or expertise that would suggest they should be recommending cuts to HHS programs and staff. As you know, the flawed judgment of DOGE personnel reportedly caused Medicaid portals and other crucial payment programs in all 50 states to be shut down, delaying payments and causing confusion across the country. These systems remain compromised, preventing the delivery of payments to community health centers, refugee services, and other supports in localities across the country.

You repeatedly emphasized during your confirmation hearings that you would run HHS with "radical transparency." Elon Musk said in a press conference on February 11, 2025 that "all of our actions are maximally transparent. In fact, I don't think there's been - I don't know of a case where an organization has been more transparent than the DOGE organization." Nothing has been farther from the truth with respect to HHS. Selectively posting misleading information on social media is not transparency, and this is especially true for HHS, one of the most far-reaching agencies in the federal government.

⁸ <https://pmc.ncbi.nlm.nih.gov/articles/PMC9537923/> "text=They%20determined%20the%20number%20of,COVID%E2%80%9019%20in%20a%20year.

⁹ <https://www.cms.gov/newsroom/press-releases/cms-statement-collaboration-doge>

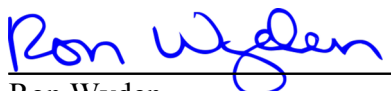
The American people deserve to know what is happening to the federal workforce tasked with carrying out HHS' tremendous responsibilities, and Congress is owed the same. As such, we request responses to the following questions by February 20, 2025 at 5:00 p.m.

1. How many HHS employees were fired between January 20, 2025 and February 18, 2025? How many of these employees were probationary? Provide a breakdown by agency, position type, and justification for termination for each category of employee at each agency.
2. How were HHS employees notified that they were being fired, and on what grounds? Provide the method of communication and content of the message employees received.
3. Provide any analysis conducted prior to firings to determine the immediate and long-term impact it will have on programs and activities those employees were tasked with administering.
4. What role did DOGE have in identifying or prioritizing employees for termination? What metrics did they use?
5. As additional layoffs are anticipated according to the EO, *Implementing the President's "Department of Government Efficiency" Workforce Optimization Initiative*, what specific guidance was given to HHS for identifying additional employees to lay off?

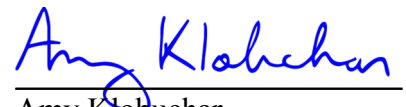
In addition to a written response, we request a detailed, staff-level briefing outlining the extent of current layoffs as well as any plans for future firings at HHS. We expect that senior representatives from the HHS Office of the Secretary make themselves available for questions.

As HHS Secretary, the consequences of epidemics, lost treatments, and lack of access to care are your responsibility. These firings represent the abdication of your sworn duty to ensure the health and well-being of America's families. You have an obligation to the American people, who rely on you as the nation's top public health official, to stop these ill-conceived and dangerous attacks on agencies and programs that Americans rely on every day.

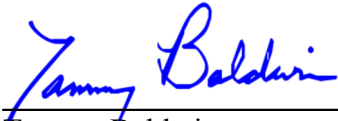
Sincerely,



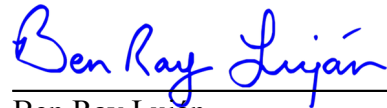
Ron Wyden
United States Senator



Amy Klobuchar
United States Senator



Tammy Baldwin
United States Senator



Ben Ray Lujan
United States Senator



Martin Heinrich
United States Senator



Bernard Sanders
United States Senator




Kirsten Gillibrand
United States Senator
Ranking Member, Special
Committee on Aging



Margaret Wood Hassan
United States Senator



Raphael Warnock
United States Senator



Christopher S. Murphy
United States Senator



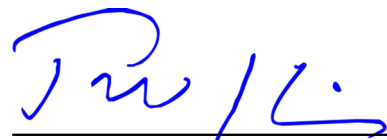
Richard J. Durbin
United States Senator



Angela Alsobrooks
United States Senator



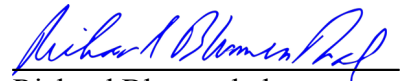
Ruben Gallego
United States Senator



Tim Kaine
United States Senator



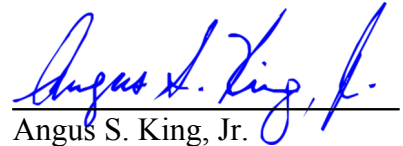
John Hickenlooper
United States Senator



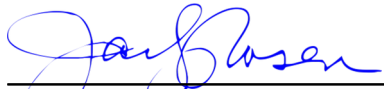
Richard Blumenthal
United States Senator



Charles E. Schumer
United States Senator



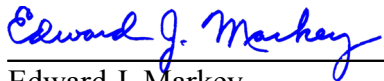
Angus S. King, Jr.
United States Senator



Jacky Rosen
United States Senator



Gary C. Peters
United States Senator



Edward J. Markey
United States Senator



Mark R. Warner
United States Senator



Chris Van Hollen
United States Senator



Tammy Duckworth
United States Senator



Maria Cantwell
United States Senator



Jeanne Shaheen
United States Senator



Elizabeth Warren
United States Senator



Peter Welch
United States Senator



Jack Reed
United States Senator



Tina Smith
United States Senator



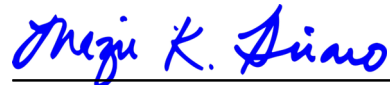
Jeffrey A. Merkley
United States Senator



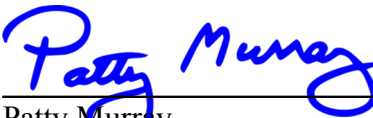
Andy Kim
United States Senator



Alex Padilla
United States Senator



Mazie K. Hirono
United States Senator



Patty Murray
United States Senator



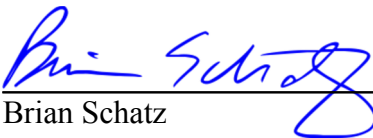
Christopher A. Coons
United States Senator



Catherine Cortez Masto
United States Senator



Adam B. Schiff
United States Senator



Brian Schatz
United States Senator



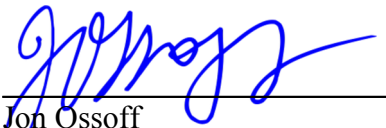
Sheldon Whitehouse
United States Senator



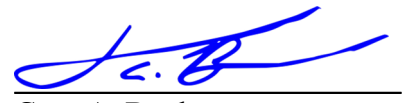
Elissa Slotkin
United States Senator



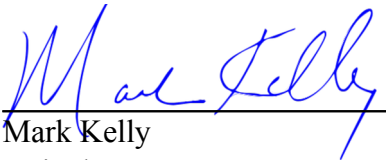
Lisa Blunt Rochester
United States Senator




Jon Ossoff
United States Senator




Cory A. Booker
United States Senator



Mark Kelly
United States Senator



Michael F. Bennet
United States Senator



John Fetterman
United States Senator