

# Congress of the United States

Washington, DC 20515

April 15, 2025

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

Dear Secretary Kennedy:

We write with shared concerns regarding the plan you announced on March 27, 2025, to begin yet another extensive round of mass terminations of civil servants at the Department of Health and Human Services (Department or HHS), along with an irrational and dangerous reorganization of the staff and operating divisions of the Department. In the weeks since that announcement, thousands of HHS employees have been summarily fired, wreaking havoc and chaos on our public health system. These actions are having a devastating and disproportionate impact on our state of Maryland. We demand a full and comprehensive analysis on what these cuts will mean for access to care, critical services, and lifesaving research in the state. We also demand an in-person meeting with you to discuss these concerns and the impact of the Department's actions on our constituents.

According to the announcement, cuts would include at least 3,500 full-time employees at the Food and Drug Administration (FDA), 2,400 employees at the Centers for Disease Control and Prevention (CDC), 1,200 employees at the National Institutes of Health (NIH), and 300 employees at the Centers for Medicare and Medicaid Services (CMS). According to the Maryland Department of Labor, preliminary data shows at least 2,755 jobs were cut in 11 federal offices located across the state, with an impact rippling across multiple counties.<sup>1</sup>

This reckless reduction in force and Department reorganization comes at a time when measles is spreading in communities across the country, avian flu is proliferating throughout our livestock populations, families are experiencing a childcare availability and affordability crisis, and cities across the country are still reeling from opioid and fentanyl overdoses. Instead of showing leadership on these concurrent emergencies and fulfilling the Department's mission, this Administration has crippled the very teams and entire divisions that combat public health challenges, prevent disparities, and ensure that our families and children are safe.

The latest reductions are part of a multipronged attack on our state, as the Department has abruptly terminated billions in critical public health grants, including \$200 million to Maryland that would go towards vaccination programs, disease surveillance, and alleviating health disparities.<sup>2</sup> The critical services the Department is responsible for were already threatened from the Administration's initial haphazard firings of probationary employees by the Department of Government Efficiency (DOGE) and Elon Musk's Fork in the Road policy, which forced thousands of Department staff to resign or retire early. Now, the Administration is further decimating the teams of civil servants that work to make Americans healthy and safe every day.

---

<sup>1</sup> <https://www.thebaltimorebanner.com/hhs-mass-layoffs-maryland-A7UXEP2ZJFGRFNQYMQ764RWRCI/>

<sup>2</sup> <https://www.marylandattorneygeneral.gov/press/2025/040125.pdf>

As you well know, the FDA, NIH, CMS, and multiple other HHS agencies are headquartered in Maryland, and these cuts pose a direct threat to our constituents, Maryland's economy, and all Americans. At the FDA, headquartered in White Oak, the Administration has annihilated the Center for Devices and Radiological Health and the Center for Drug Evaluation and Research – which the Maryland medical device and pharmaceutical industries rely on for the safe and timely approval of their products or therapeutics for patients. The Administration has also attacked the FDA's Center for Tobacco Products – which plays a critical role in prevention and harm reduction for Maryland youth. The FDA communications team that writes alerts about contaminated drugs and warnings to emergency room doctors about emerging threats was also terminated — which will have dire consequences for patient care. Across the FDA, thousands of Maryland based staffers that help to keep our food and health systems safe have been summarily dismissed, by an Administration only purporting to want to “Make America Healthy Again.”

At the NIH, based in Bethesda, this Administration has compounded its efforts to undermine the excellence of our crown jewel of scientific and medical research, with yet another round of terminations. This Administration has decimated NIH Institutes by firing leadership and critical staff to the point of non-functionality, including the National Institute of Allergy and Infectious Diseases, the National Institute on Aging, and the National Institute of Neurological Disorders and Stroke.

Maryland has already been hard hit by attacks to NIH research. In February, the NIH unveiled a new indirect cost rate guidance that would cap indirect cost rates that Maryland researchers rely on to sustain their groundbreaking, life-saving research, studies, and patient clinical trials. It also arbitrarily froze or terminated research grants in the state and has delayed the review of NIH grant applications.<sup>3</sup> This medical research funds new life-saving cures for Maryland patients – from our newborns to our seniors, from children battling rare cancers to our servicemembers injured in battle. It funds thousands of Maryland jobs, and to arbitrarily cut it threatens Maryland's health, safety, and economy. Slashing research funding will ultimately harm patients and even cost lives.

Attacks to the NIH are only the beginning of cuts to our health research infrastructure. The Agency for Healthcare Research and Quality (AHRQ), based in Rockville, is critical for tracking data on healthcare outcomes and conducting research to improve the safety of patient care has been taken apart by DOGE. The Administration plans to merge AHRQ with another operating division at the Department and gut its budget, all while firing half of its employees.

The Substance Abuse and Mental Health Services Administration (SAMHSA), based in Rockville, has already faced hundreds of layoffs. The Department dismissed 10 percent of SAMHSA's workforce during the first rounds of firings, and the Administration plans to further reduce the agency by up to 50 percent. While Maryland has made significant progress in preventing and reducing opioid overdose-related deaths, Baltimore City still has a death rate nearly double that of any other large city in the country.<sup>4</sup> Now, the Administration is pulling the

---

<sup>3</sup> <https://www.marylandattorneygeneral.gov/press/2025/040425.pdf>

<sup>4</sup> <https://www.nytimes.com/2024/08/08/us/baltimore-overdose-deaths-lawsuit-silence.html>

rug from underneath our state and the dozens of community-based organizations on the ground that rely on SAMHSA for training, resources, and technical assistance that helps with opioid use disorder prevention and treatment services.

CMS, based in Woodlawn, faced hundreds of cuts to staff, including the elimination of the Office for Minority Health and the Office of Equal Opportunity and Civil Rights, which respectively helps address health disparities across the country and resolves discrimination complaints. Employees at CMS' Innovation Center (CMMI) were fired and a third of the Medicare-Medicaid Coordination office, which helps serve the over 160,000 Marylanders that are dually enrolled in Medicare and Medicaid were let go. CMS is responsible for overseeing coverage for over 160 million Americans through Medicare, Medicaid, the Children's Health Insurance Plan (CHIP) and the Affordable Care Act (ACA) Marketplace. This includes 1.6 million Marylanders who rely on Medicaid and CHIP for lifesaving health coverage. Any attack on CMS represents a threat to Marylanders' and the nation's access to care.

At the Health Resources and Services Administration (HRSA), headquartered in Rockville, 500-600 civil servants were fired, compromising HRSA's mission to improve care for vulnerable and low-income communities. The Maternal and Child Health Bureau was wiped out by staffing cuts, crippling efforts to combat the maternal mortality crisis. Maryland women's health disparities, including maternal morbidity, remain higher than national averages, and will only be exacerbated by this action. DOGE has also reportedly fired 40 percent of the Bureau of Primary Health Care, which oversees the Health Center Program that provides high quality, accessible primary and preventive medical, behavioral and dental services to all people, regardless of income or insurance status. Maryland's sixteen Federally Qualified Health Centers deliver comprehensive primary healthcare to more than 360,000 patients across Maryland. That access to care in our state are at risk without civil servants to effectively run the program.

The Indian Health Service (IHS), which is also headquartered in Rockville, was not mentioned in initial reporting regarding the HHS reorganization or reduction in force. In fact, longtime civil servants in the Senior Executive Service (SES) have reported that their duty stations have been reassigned to remote IHS locations ranging from Alaska to South Dakota. While these locations suffer from high vacancy rates, the Department is pushing staff that do not have the qualifications or background for available IHS roles into an ultimatum: relocate your family across the country for a job that does not actually exist, or leave the Department.

Additionally, the Department fired approximately 500 staffers at the Administration for Children and Families (ACF) in the April 1 wave of terminations, paralyzing the Department's ability to effectively operate its human services programs. As you know, most program and support staff were eliminated in five regional offices around the country. While ACF's Region 3 Office – which serves Maryland – remains open for now, staff in Region 3 will likely have to absorb the work and caseload of now shuttered Regions 1, 2, 5, 9 and 10. This will put an untenable strain on their ability to support states like Maryland in operating child support, family assistance and child welfare programs, and providers operating Head Start and child care programs.

This is in addition to the nearly two hundred probationary ACF employees who have been on administrative leave since mid-February, and because of this Administration, are still unable to

provide states like Maryland with the technical assistance needed to operate critical programs, increasing the financial burden on already-struggling households. Head Start serves seven thousand children in Maryland. Thousands more families rely on the availability of affordable, quality childcare in the state – availability which is endangered when the civil servants that help providers adapt to workforce challenges or monitor for abuse and neglect in our state’s facilities are shamefully fired or prevented from doing their jobs.

Also at ACF, the Department terminated the entire Low Income Home Energy Assistance Program (LIHEAP) staff, threatening the timely disbursement of millions of dollars to states like Maryland, to help thousands of our constituents stay safe in the coming summer months. More than 18% of Maryland households are energy burdened; the Maryland Office of Home Energy Programs received a record number of energy assistance applications last year.<sup>5</sup> Likewise, the Department eliminated the Office of Family Assistance – undermining the ability for the nearly 28,000 Maryland families receiving Temporary Assistance for Needy Families (TANF) to receive critical support without interruption.

Both the dismantling of the Administration for Community Living and the slashing of reportedly half of the staff that work on federal aging and disability programs at the Department will cause real harm to programs in Maryland that support some of our state’s most vulnerable communities – seniors and individuals with disabilities. This includes programs that prevent elder abuse, connect seniors with nutritious meals, and provide supports to caregivers – like the Maryland Caregiver Navigation Grant.

Perhaps most galling, is that you have admitted that many of these firings at the Department are in error, telling reporters “We’re going to do 80% cuts, but 20% of those are going to have to be reinstated, because we’ll make mistakes.” Further reporting found that HHS has no intention of actually reinstating a significant number of the staffers that have been fired or rectifying the mistakes it has made – calling into question your control of the situation and understanding of the Department’s reorganization.<sup>6</sup> As the Secretary, you are ultimately responsible for answering for both these “mistakes” and any harm that comes from your destruction of our public health workforce and infrastructure.

As such, we request an in-person meeting with you no later than May 1, 2025, to discuss these concerns. We also request comprehensive answers to the following questions, including details on the reductions at the Department to date, and your plans for additional workforce reductions and reorganization.

1. For each of the below agencies, please specify since January 20, how many Maryland residents: received a RIF notice or were terminated on the basis of their probationary status? Please also specify how many more Maryland residents the agency intends to respectively terminate:
  - SAMHSA
  - FDA

---

<sup>5</sup> <https://www.wypr.org/wypr-news/2024-09-09/maryland-anticipates-record-number-of-applications-for-energy-assistance>

<sup>6</sup> <https://www.politico.com/news/2025/04/04/rfk-jr-said-hhs-would-rehire-thousands-of-fired-workers-that-wasnt-true-00274034>

- NIH
  - CDC
  - CMS
  - IHS
  - HRSA
  - ACF
  - ACL
  - AHRQ
2. For each of the below agencies, please specify since January 20, how many Maryland residents are currently on administrative leave pending termination:
    - SAMHSA
    - FDA
    - NIH
    - CDC
    - CMS
    - IHS
    - HRSA
    - ACF
    - ACL
    - AHRQ
  3. For each of the below agencies, please specify the number of Maryland residents who participated in the Deferred Resignation Program:
    - SAMHSA
    - FDA
    - NIH
    - CDC
    - CMS
    - IHS
    - HRSA
    - ACF
    - ACL
    - AHRQ
  4. Please describe the reduction in force plans at the IHS headquarters and at IHS locations across the country.
  5. Please provide a detailed description of impact analysis performed to determine the impact on cancer research as a result of NIH Reductions in Force.
  6. Please provide a detailed description of impact analysis performed to determine the impact on vaccine development and research as a result of FDA Reductions in Force.
  7. Please provide a detailed description of the impact analysis performed regarding reductions in staffing to ACF services and programs, including technical assistance to

states and childcare providers, childcare costs and child safety, supports for survivors of violence, and the effectiveness of the TANF and LIHEAP programs.

- a. Please provide a detailed description of the analysis performed by the Department describing how LIHEAP staffing reductions will not lead to higher energy costs for Marylanders.
  - b. Please provide a detailed plan for how the Department plans to ensure that there is no delay due to case backlogs experienced by the state of Maryland or Maryland human services providers due to staff reductions at ACF?
8. Please provide a detailed description of the analysis performed by the Department describing how the staffing reductions to HRSA will not impact Maryland FQHCs, or access to affordable care in Maryland communities.
9. Please provide a detailed description of the analysis performed by the Department describing how the staffing reductions to CMS will not impede Marylander's access to Medicare, Medicaid, CHIP and the ACA Marketplace.

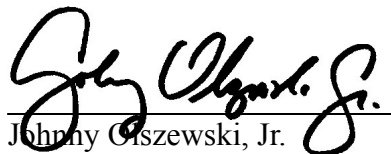
Sincerely,



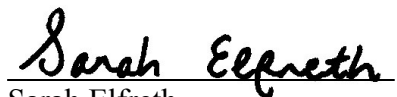
Angela Alsobrooks  
United States Senator



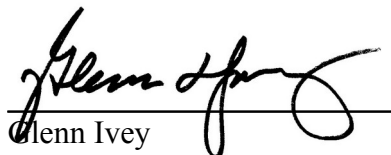
Chris Van Hollen  
United States Senator



Johnny Olszewski, Jr.  
Member of Congress



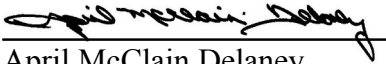
Sarah Elfreth  
Member of Congress



Glenn Ivey  
Member of Congress

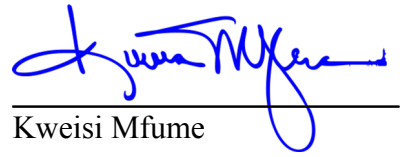


Steny H. Hoyer  
Member of Congress



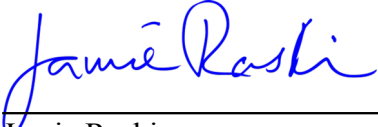
---

April McClain Delaney  
Member of Congress



---

Kweisi Mfume  
Member of Congress



---

Jamie Raskin  
Member of Congress