

United States Senate

WASHINGTON, DC 20510

April 4, 2025

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

Dear Secretary Kennedy:

We write with extreme concerns about the Department's decision to suddenly terminate grants and de-obligate funds that have already been awarded to states, Tribes, and localities across the country to address public health threats, including the devastating substance use and mental health crisis. Last week, without any notice the Department of Health and Human Services (HHS) terminated approximately \$12 billion in supplemental funding that states and communities were actively putting to use to address urgent needs and protect American's health. Pulling the rug out from these local efforts will make our country less prepared to tackle ongoing disease outbreaks like bird flu and measles, the fentanyl crisis, and much more—and will put the health and well-being of the American people in jeopardy.

During President Trump's first administration, the COVID-19 pandemic killed over 500,000 Americans in 2020 alone. It exposed significant weaknesses in our public health infrastructure and preparedness capabilities while also exacerbating our mental health and substance use crises. Over the course of several bills, Congress appropriated supplemental funding to respond to the pandemic, support behavioral health and recovery efforts, and better prepare for future threats. States and local jurisdictions across the country have been dutifully spending down funds that were obligated to them, consistent with purposes of the appropriations, the length of time they were made available in law, and the conditions of their grants.

The Department's stated rationale for terminating these grants is that the pandemic is over. **However, these funds were not appropriated to only be available or used during the pandemic or the COVID-19 public health emergency.** Understanding various needs would go well beyond the specific period of the pandemic, Congress appropriated many of these funds without fiscal year limitation to be available until expended. Congress chose not to condition the availability of the funding on whether there was an active public health emergency or limit the period of availability of funding accordingly.

These de-obligations include funds appropriated to the Substance Abuse and Mental Health Services Administration (SAMHSA). These resources have been helping states and local

communities prevent and treat mental health and substance use conditions that worsened during the pandemic and that states are still struggling to address. These are not issues that ended when the COVID-19 public health emergency ended—drug overdose deaths in 2023 topped 105,000 and suicide rates and mental health conditions among youth continue to climb post-pandemic. These funds, which states are required to expend by September 30, 2025, are being used for early intervention for children, crisis response teams, overdose prevention work, to build out the 988 suicide and crisis lifeline, and much more. States were preparing to wind down these programs as the funding expires, but the abrupt cancellation of these grants puts lives and essential response efforts at serious risk as states scramble to adjust. In Wisconsin, for example, the state has indicated that the termination of these grants may result in those in substance use treatment being discharged before treatment is complete or reducing the amount of the lifesaving opioid overdose reversal drug, naloxone, provided to law enforcement in communities across the state.

The de-obligations also include funds granted through the Centers for Disease Control and Prevention (CDC) that have supported a wide range of public health programs administered by state and local health departments and were not set to expire until fiscal year 2026, or in some cases, 2027. These funds were being used to bolster already underfunded health departments across the country to help modernize data systems to enable electronic case reporting, build laboratory capacity, and improve testing capabilities for diseases such as avian influenza, measles, and other respiratory diseases. The abrupt cancellation of these grants will further strain health departments responding to the ongoing bird flu and measles outbreaks, as well as the resurgence of other infections such as tuberculosis, pertussis, and syphilis.

For example, Lubbock, Texas, the center of the ongoing measles outbreak that has infected at least 400 individuals, had 3 grants terminated that were being used to respond to the outbreak. Public health officials in Maine announced the state will lose \$91 million in funding and indicated the grants were being used to fill gaps in their public health infrastructure including biosecurity and mental and behavioral health care. North Carolina's cut of \$100 million will affect the state's immunization program and infectious disease response. The immediate cancellation of these funds will not only make our country less safe from diseases, but will result in the firing of hundreds, if not thousands of public health workers nationwide. Washington state alone has estimated these grant terminations will put at least 200 jobs at risk.

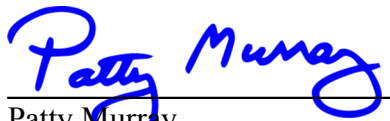
Given the sudden nature of these actions and lack of notice provided to grantees we request the information and responses to the following questions by April 7, 2025 at 5:00pm.

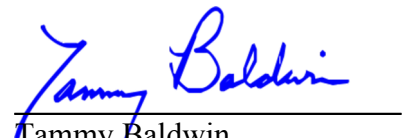
1. Provide a list of grants terminated, including any grants that were terminated and later reinstated.
2. Provide a table of de-obligated funds by state.


3. What is the source of the de-obligated funds? Provide the amount by public law and account/section.
4. What is the Department's justification for terminating these grants?
5. Why did the Department only provide a 30-day window for states to close out grants and not provide more notice for the orderly winddown of programs?
6. What is the Department's plan for the approximately \$12 billion in funding that was de-obligated?
7. Does the Department have plans to de-obligate additional supplemental funding, including funds provided in the American Rescue Plan?
8. Did the Department ensure that the emails they sent were up to date and confirm that all states and grantees whose funds were de-obligated were aware prior to the Department rescinding these funds?


As previously stated, the "cause" given by the Department for terminating these funds is completely inconsistent with the purposes for which Congress appropriated these funds. HHS must immediately reverse course.

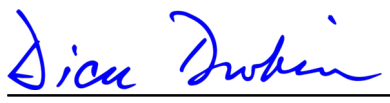
Sincerely,



Patty Murray
United States Senator



Tammy Baldwin
United States Senator


Bernard Sanders
United States Senator


Tina Smith
United States Senator


Richard J. Durbin
United States Senator

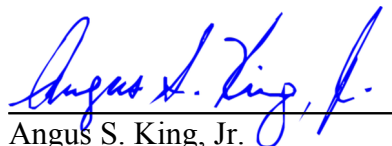

Angela D. Alsobrooks
United States Senator



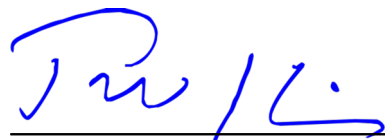
Jack Reed
United States Senator



Richard Blumenthal
United States Senator



Angus S. King, Jr.
United States Senator



Tim Kaine
United States Senator



Chris Van Hollen
United States Senator



Mazie K. Hirono
United States Senator



Tammy Duckworth
United States Senator



Christopher A. Coons
United States Senator



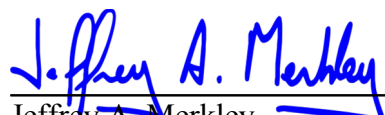
Jeanne Shaheen
United States Senator



Mark R. Warner
United States Senator



Adam B. Schiff
United States Senator



Jeffrey A. Merkley
United States Senator