Congress of the United States Washington, DC 20515

May 13, 2025

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

Dear Secretary Kennedy:

We write once again with urgent concern regarding the ongoing instability at the World Trade Center Health Program (WTCHP), which provides essential medical care, monitoring, and research to more than 137,000 9/11 responders and survivors across every state and nearly every Congressional district. Since January, the Trump Administration has attempted to fire critical WTCHP staff at least three times. In each instance, the U.S. Department of Health and Human Services (HHS) reversed course only after facing intense public backlash.

We are deeply disturbed by reports that, beginning in April, the WTCHP was functionally paralyzed. The program reportedly halted new member enrollments—including more than 800 eligible 9/11 responders and survivors—and left over 1,200 condition certifications in limbo. This backlog prevented clinics from initiating critical cancer treatments and other essential care. The abrupt removal of Dr. John Howard and 16 key staff members, followed by misleading public statements from HHS denying those very terminations, has seriously undermined public trust in the agency's stewardship of this lifesaving program.

The timeline of repeated firings and reinstatements within the WTCHP reflects a deeply troubling pattern of mismanagement and instability:

- 1. On Friday, February 14, 2025, HHS fired all probationary employees, including 20% of the World Trade Center Health Program staff. The New York congressional delegation sent multiple letters to HHS and President Trump expressing their outrage at these firings.
- 2. On February 21, 2025, the CDC announced that it was reversing the staff cuts.
- On April 1, 2025, HHS announced layoffs of thousands of employees, including Dr. John Howard, Administrator of the World Trade Center Health Program. Additionally, 16 WTCHP staff were given notice of intent to be fired. Once again, the New York delegation sent multiple letters demanding that the administration reverse these firings.

- 4. On April 3, 2025, Secretary Kennedy called many of these program cuts a "mistake" and promised that no "essential services" would be impacted by HHS' restructuring.
- 5. On April 5, 2025, HHS announced that it had reinstated Dr. Howard.
- 6. On April 29, 2025, the Chief Medical Officer of the FDNY WTCHP issued a statement stating that Dr. Howard had still not been reinstated as head of the program. As a result, the program had not been treating new cancer cases, enrolling new program applicants, or providing written approvals for treatment of new conditions.
- 7. On May 1, 2025, Dr. Howard was apparently reinstated, but only through June 2, 2025.
- 8. On May 2, 2025, the 16 WTCHP staff members who had been given notice of intent to be terminated were officially let go.
- 9. On May 3, 2025, HHS publishes a misleading tweet claiming that no CDC employees had been laid off the day before.
- 10. On May 5, 2025, Secretary Kennedy stated that "President Trump has not cut the 9/11 Program."
- 11. On May 7, 2025, 15 of the 16 fired WTCHP staffers received notice that their terminations were rescinded, and reports indicated that Dr. Howard had been "permanently reinstated."

While we welcome the news that Dr. John Howard is being reinstated as Administrator of the WTCHP and that the 15 other staff members recently terminated are reportedly returning to their roles, this reversal comes only after intense public outcry, bipartisan Congressional pressure, and media scrutiny. These reinstatements, however necessary, do not undo the damage already inflicted. Critical services were suspended, cancer patients were turned away, and hundreds of new enrollees were denied access. And to this day, the Department of Health and Human Services (HHS) has refused to acknowledge the full scope of the disruption publicly.

Our 9/11 first responders and survivors deserve honesty, stability, and respect—not chaos and deception.

Therefore, we request your response to the following questions by May 28, 2025:

- 1. You and your staff have repeatedly stated that the reorganization of HHS has not impacted services. In light of recent disruptions to the World Trade Center Health Program, do you still stand by that assertion?
- 2. What is the current status of the more than 800 responders and survivors who were unable to enroll in the program, and the 1,200 delayed condition certifications, and were these

disruptions directly linked to the termination or absence of Dr. Howard and other key WTCHP staff?

- 3. Why were providers across New York, including the FDNY, barred from initiating treatment for newly diagnosed 9/11-related cancers during this period?
- 4. What is the current status of the petitions to add autoimmune and cardiac conditions to the list of certifiable WTCHP illnesses, which were expected by March 2025?
- 5. What safeguards have been implemented to prevent further disruptions to enrollment, condition certification, and care delivery within WTCHP?
- 6. Who specifically authorized the terminations, retroactive notices, and administrative leave instructions for WTCHP staff, particularly after HHS publicly stated that no such firings would take place?
- 7. Why did HHS issue a misleading social media post claiming that no CDC employees had been laid off, despite evidence to the contrary?
- 8. Have all 16 WTCHP-affiliated staff who received termination notices been formally reinstated? Are their positions secure beyond July 2, 2025?
- 9. Has Dr. John Howard been permanently reinstated as WTCHP Administrator, and does he retain full authority to lead the program without restrictions? Will he remain as Administrator of the program through the remainder of President Trump's term?
- 10. Will the Secretary and the Trump Administration commit to restoring WTCHP staffing to the OMB-authorized level of 138 and publicly support the 9/11 Responder and Survivor Health Funding Correction Act, which addresses the program's long-term funding shortfall projected to cause cuts in 2027?

We look forward to your prompt response.

Sincerely,

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